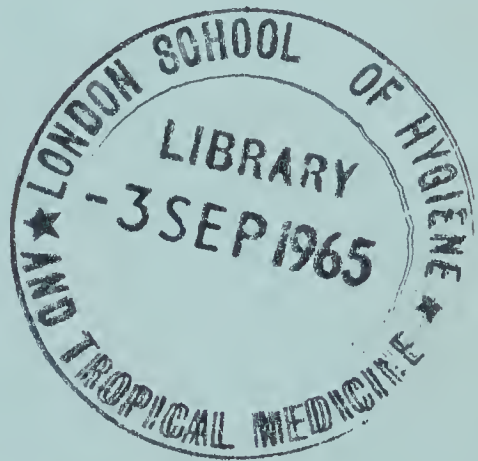


COUNTY BOROUGH OF PRESTON.



REPORT
OF THE
Medical Officer of Health
on the Health of the Borough
for the year
1964.

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INTRODUCTION

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE COUNTY BOROUGH OF PRESTON.

On the succeeding pages there is recorded the health of the population in terms of the standard indices in general use together with a record of the work carried out by the staff in the fields of health and welfare.

In the study of local indices of health annual fluctuations generally are of much less significance than trends over a longer period since the former in a medium sized population become relatively accentuated by chance incidents without particular importance whilst the latter reflect the impact of ponderable forces for good or evil on the life of the people.

This is the most exciting century which mankind has seen and the post-war years have experienced a remarkable acceleration both in scientific progress and political development whilst the moral and ethical standards of past generations have been the subject of severe criticism and challenge.

Political development has been associated with a rapid advance in material welfare and Preston has been in the forefront in the improvement of the physical environment and in the care of the aged and the handicapped. The pace of progress here is determined solely by the availability of finance for each project.

Scientific advance has resulted in the replacement of the hospitals as we once knew them with what are now institutes of technology, has dictated an entirely new conception of the phrase "hospital treatment" and consequentially has determined a new pattern of domiciliary care.

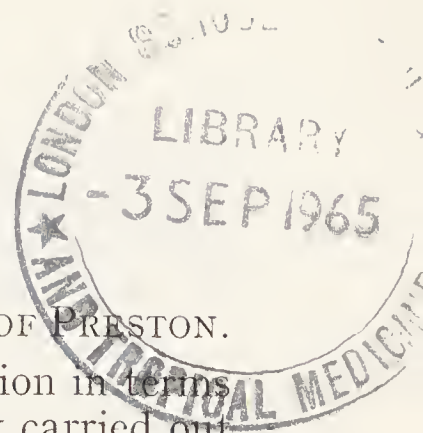
The challenge of the new morality has resulted in new thinking on birth control and the position of the unmarried mother in society, it has accentuated the value of sex education in children and it has highlighted the behaviour of an irresponsible minority who find it difficult to conform to orthodox patterns of behaviour. It has also seen the drug habit extend through a much wider section of the population.

The restricted field of health and welfare in which local government exercises statutory powers is part and parcel of this turbulent pattern. Established services of many years standing have by their undoubted success raised uncertainties in the mind as to the need for their continuance at least in existing form. Elsewhere, with the enhanced level of physical health in the population, the purpose for which a service was originally established has vanished.

In such a period of inquisition, abounding in achievement, inevitably old standards are discarded for newer that are now within the compass of practicability, tasks that previously were untouched because they were insurmountable are now merely difficult and require for their resolution a reorientation of outlook and the use of new techniques, and in the midst of this restlessness can be heard at times a call for change without evidence for its justification, change for the sake of change.

How then has the health of the community reacted to this newer dramatic motivation:

Once again a year has passed without a maternal death and more than 11,000 deliveries have taken place since the last death early in 1960. Both perinatal and infant mortality are the lowest ever achieved in Preston and the former is on a level with the national rate even though the northern part of the country runs a consistently higher rate than the south and a disproportionate part of the lower income groups live within the county borough boundary. The general death rate was again lower than in recent years and almost two-thirds of those who died in 1964 were beyond 64 years of age. Nevertheless more people than ever, six every week, died



from coronary disease and lung cancer again caused more than one death each week. The more orthodox but less common forms of suicide accounted for fifteen deaths of which eight occurred in men of working age. Bronchitis takes third place in the table of mortality though it is now appearing as a cause of death mainly in the later decades.

In terms of mortality then 1964 is the best in the history of Preston, a year when the fruits of past labours have been garnered, when microbic disease, poverty and squalor had less influence than ever on the lives of the people and when the contemporary problems are more evident and to that extent their solution is nearer.

In terms of health and welfare further progress has been made. Action to eliminate unfit housing was maintained at a high level and over 6,000 houses of this category have been dealt with since work was started again after the war. The standards of comfort achieved by the Housing Committee in the modern houses and flats built to replace the worn out properties of the last century are adding considerably to the well being of the people whether they be young or old. Progress in clean air has reached the stage when one quarter of the dwellings in Preston are covered by Smoke Control Orders whilst industrial smoke has been reduced to a fraction of what it once was.

In the field of child health the "at risk" registers are well established and special observation of appropriate children is being carried out. The work of the medical staff is now related to the assessment and recording of developmental characteristics and potential. It is pertinent to note that when the child welfare clinic work is under fire as having outlived its usefulness the customers are flocking along in greater numbers than ever.

In mental health and with the care of the old and the handicapped the desiderata are fairly well recognised. The two new hostels in the pipe line will be a measure of the real need for accommodation of this kind for the mentally disordered in the general community and the deferment of the adult training centre extensions and of an increase in the number of home helps needed for the home care of the sick and the aged cannot be associated with any doubt as to the merit of these proposals when the demand is so apparent.

The continued expansion of the chiropody service has proved a boon to many and the employment of a physiotherapist in the treatment of paresis in association with recent cerebral haemorrhage is a development of some importance.

Whilst the provision of these and other services in the domiciliary field are of undoubted help to general medical practice and are appreciated by many individual practitioners a planned scheme of integration of the family doctor and the local authority ancillary workers in the care of the sick in their homes is as far off as ever. One group practice has, however, sought and obtained the services of a midwife in the conduct of an ante natal clinic in its own premises.

It is always a pleasure to the staff when worn out or temporary accommodation is replaced by new purpose-built premises and the new building in Deepdale Road housing the ambulance service, the disinfection and public convenience services and the general motor transport of the department has afforded the deepest satisfaction as has the new Avenham Health Centre. Again the opening of the new municipal abattoir is to be acclaimed for the greatly improved conditions under which the slaughtering of animals and the handling of meat are carried out.

I have to record my thanks to those members of the staff who have contributed to the compilation of this report and my gratitude and good wishes to Dr. Gladys McLean who served the Corporation loyally and with distinction, especially in the field of maternal and child health, for twenty-seven years until her retirement in August.

J. S. G. BURNETT,

Medical Officer of Health.

Senior Public Health Officers of the Local Authority

Medical Officer of Health and Port Medical Officer	J. S. G. BURNETT, M.D., D.P.H.
Deputy Medical Officer of Health and Deputy Port Medical Officer	I. G. P. FRASER, M.B., Ch.B., D.P.H.
Departmental Medical Officers and School Medical Officers	G. A. McLEAN, M.B., Ch.B., D.P.H. (retired 26.8.64) K. DOWLING, M.B., Ch.B. I. M. R. PURDOM, M.B., Ch.B., D.P.H. A. T. NOLAN, L.R.C.P. & S., D.P.H. B. G. FARRELL, M.B., Bch., B.A.O., D.P.H., D.C.H. (resigned 14.7.64) J. T. CARROLL, M.B., B.Ch., L.M., D.R.C.O.G., F.R.C.S. (commenced 1.7.64)
CLINICIANS UNDERTAKING CONSULTATIVE WORK—	
Consultant Obstetricians	W. H. TOD, B.Sc., M.D., F.R.C.O.G. W. A. ROBSON, M.B., Ch.B., F.R.C.O.G.
Consultant Oto-rhino larynologists	J. A. KERSLEY, F.R.C.S., D.L.O. H. WICKHAM, M.B., Ch.B., F.R.C.S.
Consultant Orthopaedic Surgeon...	R. S. GARDEN, M.Ch.Orth., F.R.C.S.
Consultant Paediatrician	A. G. HESLING, M.R.C.P., D.C.H.
Consultant Psychiatrist	C. S. PARKER, M.D., D.P.M.
Consultant Orthodontist	F. D. ROWE, L.D.S.
Consultant Anaesthetist	J. A. L. COOPER, M.R.C.S., L.R.C.P.
Ophthalmic Surgeons	*D. PLUM, M.R.C.S., L.R.C.P., D.T.M., D.O.M.S. *J. MATTHEWS, M.R.C.S., L.R.C.P., D.P.H.
Veterinary Officer	F. J. PROCTOR, B.Sc., M.R.C.V.S., D.V.S.M.
Senior Dental Officer	A. KERSHAW, L.D.S.
Chief Public Health Inspector ...	E. OWEN, M.A.P.H.I.
Superintendent Health Visitor ...	Miss E. W. SOWERBY, S.R.N., S.C.M., H.V.'s Certificate.
Non-Medical Supervisor of Midwives	Miss D. JOBLING, S.R.N., R.F.N., S.C.M. (resigned 31.1.64) Miss M. HADFIELD, S.R.N., S.C.M., M.T.D. (commenced 1.4.64)
Superintendent District Nurse ...	Miss M. MORGAN, S.R.N., S.C.M., Q.N., H.V.

Domestic Help Organiser	...	...	MISS S. E. DOHERTY.	
Speech Therapist	...	...	*Mrs. J. SPENCER	(22.1.64—16.7.64)
Chiropodists	...	...	*Miss M. BILLING, M.Ch.S., S.R.Ch. *Miss B. J. HIND, M.Ch.S. *Mrs. P. M. BROMLEY, M.Ch.S. *Mr. R. BEARDSWORTH, M.Ch.S. *Mrs. M. BEARDSWORTH, M.Ch.S., S.R.N. Miss A. SELLS, M.Ch.S. (commenced 16.11.64)	
Physiotherapists	...	...	*Mrs. E. HERLING, M.C.S.P. Mrs. V. J. FOULKES, M.C.S.P.	(resigned 17.7.64) (commenced 14.9.64)
Chief Administrative Assistant	...		R. HARRISON, Cert. R.S.I. and S.I.E.J.B.	

* *Part-time.*

Committee concerned with Public Health matters

HEALTH COMMITTEE.

1. The Council hereby refer to the Health Committee, subject to the confirmation of their proceedings by the Council, the duties, powers and functions of the Council in relation to or arising under the following :—

- (a) all matters relating to the health of the borough and the prevention, notification and treatment of disease, not otherwise delegated to this or some other committee of the Council ;
- (b) the superintendence of the department of the Medical Officer of Health (other than those officers mainly attached to services administered by other committees) and the appointment of Public Health Inspectors ;
- (c) the Rag Flock and Other Filling Materials Act, 1951; the Fabrics (Misdescription) Act, 1913, the Fertilisers and Feeding Stuffs Act, 1926, the Agricultural Produce (Grading and Marking) Acts, 1928 and 1931, Agriculture (Safety, Health and Welfare Provisions) Act, 1956, the Riding Establishments Acts 1939 and 1964, and any Orders, Rules, Regulations or Byelaws having effect under any of the said Acts ;
- (d) the provisions of the Nurses Acts, 1957 and the Nurses Registration Act, 1957;
- (e) as the Port Health Authority;
- (f) as the Local Health Authority under the National Health Service Acts.
- (g) Part III of the National Assistance Act, 1948, relating to the provision of residential and temporary accommodation and the provision of welfare services for handicapped persons, Trading Representations (Disabled Persons) Act, 1958;

- (h) Part IV of the National Assistance Act, 1948, except the registration of charities for disabled persons ; Trading Representations (Disabled Persons) Act, 1958.
- (i) the provision and maintenance of public sanitary conveniences.
- (j) as the local Health and Welfare Authority under the Mental Health Act, 1959.

2. The Council hereby delegate to the Health Committee the duties, powers and functions of the Council arising under or in pursuance of the following provisions and any Orders, Rules, Regulations or Byelaws having effect hereunder:—

- (a) the Diseases of Animals Act, 1950, for the purpose of which the committee shall be the executive committee;
- (b) the Pharmacy and Poisons Acts, 1852 to 1941;
- (c) the provisions of the Public Health Acts and local Acts, so far as they relate to health and sanitary matters, and in particular, but without prejudice to the generality of the foregoing delegation, the following provisions of the Public Health Act, 1936, viz. :—

Sections 39 to 41; 44 to 52; 56; 58; 83 to 86; Part III; Sections 124; 138 to 141; Parts IX and X; Sections 259 to 261; 268; 269 and 288.

and the following provisions of the Public Health Act 1961, viz. :

Sections 15 to 23; 26; 29 (so far as this section is applicable to Demolition and Clearance Orders) ; 32 ; 35 to 42 ; 74 to 79.

- (d) the Housing Acts, so far as they relate to insanitary property overcrowding and houses in multiple occupation.
- (e) Part I (Health General Provisions) and Part VIII (Home Work) of the Factories Act, 1961 ;
- (f) the Food and Drugs Acts, 1955 (except Part III) and the Merchandise Marks Acts, 1887 to 1953 ;
- (g) the Offices, Shops & Railway Premises Act, 1963 (all sections except 28-41) ;
- (h) Prevention of damage by Pests Act, 1949;
- (i) the Rivers Pollution Prevention Acts;
- (j) the Midwives Act, 1951;
- (k) the Pet Animals Act, 1951;
- (l) Sections 36 and 90 of the Housing Act, 1957, and so much of the Rent Act, 1957, as relates to the issue and cancellation of certificates of disrepair.
- (m) The Clean Air Act, 1956.
- (n) Section I of the Noise Abatement Act, 1960;
- (o) Part I (except Section 24) of the Caravan Sites and Control of Development Act, 1960.
- (p) Consumer Protection Act, 1961.
- (q) Slaughter-Houses Act, 1958—regulations thereunder;
- (s) Slaughter of Animals Act, 1958—regulations thereunder;
- (t) The Animal Boarding Establishments Act, 1963 ;
- (u) Nursing Homes Acts and Regulations, 1963.

SUB-COMMITTEES OF THE HEALTH COMMITTEE.**Mental Health Services Sub-committee.**

Duties under the Mental Health Act 1959, and the care and after-care of persons suffering from mental illness or defectiveness.

Domiciliary Services Sub-committee.

Duties relating to the care of mothers and young children, midwifery, health visiting, home nursing, vaccination and immunisation, prevention of illness, care and after-care (except of persons suffering from mental illness or defectiveness) and domestic helps.

Homes, Hostels and Welfare Services Sub-Committee.

Duties concerned with the provision of residential accommodation for the aged and infirm and others in need of care and attention, the provision of temporary accommodation for persons in urgent need of such accommodation, and the registration and inspection of disabled persons' or old persons' homes provided otherwise than by the local authority, and with the provision of welfare services for the blind, deaf and dumb, crippled and others suffering from disabilities.

Statistics and Social Conditions of the Area 1964

Area	... ..	(acres)	6,357
Population (Registrar General's mid-year estimate, 1964)	... ..		110,390
	(Census, April 1961—113,341)		
Number of inhabited houses, according to Rate books (as at 1.4.64)	...		35,631
Rateable Value (as at 1.4.64)	... ..	£	4,286,973
Sum represented by a Penny Rate (Financial year, 1964-65)	... ..	£	16,968
Total cost of services administered by the Health Committee for the year ending 31st March, 1965:—			

Expenditure	... ..	£	540,820
Income	... ..	£	148,953
Net cost	... ..	£	391,867

*Birth Rate per 1,000 of
population*

			<i>Total</i>	<i>Males</i>	<i>Females</i>	<i>Crude Rate</i>	<i>Adjusted *</i> <i>Rate</i>
Live Births	... ..		2,152	1,182	970	19.49	21.05
Legitimate	... ..		1,922	1,054	868	17.41	18.80
Illegitimate	... ..		230	128	102	2.08	2.25
Number of Still-births : 38.						Rate per 1,000 total births : 17.35.	

Total live and Stillbirths : 2,190.

Deaths of Infants under one year of age : 53.

Infant mortality rate per 1,000 live births :

<i>Legitimate</i>	<i>Illegitimate</i>	<i>Total</i>
22.89	39.13	24.63

Deaths of Infants under one month : 33.

Neo-natal mortality rate : 15.33 per 1,000 live births.

Early Neo-natal Mortality Rate : 11.62 per 1,000 live births.

Perinatal Mortality Rate : 28.77 per 1,000 Total live and still-births.

Illegitimate live births per cent of total live births : 10.69%.

Number of women dying in or in consequence of child birth :—

<i>Deaths</i>	<i>Rate per 1,000 live and still-births</i>
—	—

Deaths—nett : 1,370. Rate per 1,000 population : 12.41 (crude rate)
14.02 (adjusted rate)*.

Percentage of total deaths in hospitals and public institutions : 44.01%

Deaths from Cancer (all ages) : 238

Deaths from Measles (all ages) : Nil.

Deaths from Whooping Cough (all ages) : Nil.

Deaths from Gastro Enteritis (under 2 years of age) : 5.

Number of Marriages : 981.

* Area comparability factor : Births ... 1.08
Deaths ... 1.13

Table 1.
Comparative Statement of Vital Statistics.
Year 1964.

		Birth Rate (Crude)	Death Rate (Crude)	Infant Mortality Rate	Stillbirth Rate (per 1,000 live and still births)	Perinatal Mortality Rate	Death Rate from Phthisis	Death Rate from other Tubercular Diseases	Maternal Mortality Rate per 1,000 Total (Live and Still Births)		
									Maternal causes excluding abortion	Due to abortion	Total maternal mortality
England and Wales (Provisional)		18.4	11.3	20.0	16.3	28.2	0.047	0.006	0.20	0.06	0.25
Birkenhead	...	20.06	11.0	20.6	21.2	33.1	0.02	—	0.6	—	0.6
Burnley	... ..	17.41	14.94	20.29	23.35	36.09	0.05	—	—	—	—
Bury	... ..	20.05	13.14	22.49	19.68	29.01	0.01	—	—	—	—
Halifax	... ..	18.35	14.4	33.1	11.2	18.62	0.006	0.002	—	—	—
Liverpool	... ..	21.4	11.2	21.7	17.8	28.7	0.052	0.004	0.126	0.063	0.189
Manchester	...	20.61	11.97	28.76	20.07	35.34	0.08	0.01	0.22	0.30	0.52
Oldham	... ..	19.25	14.20	35.04	15.88	37.66	0.09	—	—	—	—
Preston	... ..	19.49	12.41	24.63	17.35	28.77	0.82	—	—	—	—
Rochdale	...	18.5	14.1	22.6	20.9	33.5	0.07	—	—	—	—
Salford	... ..	20.31	12.26	30.46	25.22	41.83	0.073	0.007	—	—	—
St. Helens...	...	17.0	10.3	21.2	27.7	41.5	0.10	0.01	1.08	—	1.08
Stockport	... ..	18.47	12.24	22.4	18.27	32.81	0.028	0.007	0.372	—	0.372
Wallasey	... ..	19.45	12.77	19.90	15.18	28.90	0.068	0.010	—	—	—
Wigan	... ..	16.49	12.48	23.55	22.26	36.07	0.05	0.01	0.77	—	0.77

Population.

Though there was again an excess of births over deaths, on this occasion to the extent of 782, the registrar general's inter census estimate for 1964 at 110,390 showed a drop of 1,280. Apart from the period of the last war this is the lowest population within the administrative area in the present century and its occurrence in a period of full employment with a consistently high birth rate is a reflex of the state of prosperity in the area and the rising standard of living with an associated movement of population to modern housing in the suburbs.

Births.

Fertility remains high in Preston and the crude rate at 19.49 per 1,000 population is, apart from that of 1962, the highest since the post-war bulge of the 1940's. The rate adjusted by the registrar general to take account of the actual number of child-bearing women in Preston is 21.05, a figure well in excess of the national birth rate of 18.4.

Table 2.
Number of Births registered in the various wards.

Ward					Estimated Population	Births	Rate per 1,000 population
Ashton	...	...	...	...	8,650	175	20.23
Avenham	...	...	...	...	8,070	170	21.07
Central	...	...	...	...	9,850	230	23.35
Deepdale	...	...	...	...	9,320	142	15.24
Fishwick	...	...	...	...	9,510	164	17.24
Moorbrook	...	...	...	...	9,340	166	17.77
Park	...	...	...	...	8,780	194	22.10
Ribbleton	...	...	...	...	12,290	248	20.18
St. John's	...	...	...	...	7,650	176	23.01
St. Matthew's	...	...	...	...	9,320	181	19.42
Savick	...	...	...	...	9,080	154	16.96
Tulketh	...	...	...	...	8,530	152	17.81
Total					110,390	2,152	

Deaths.

There was no outbreak of acute fatal illness in 1964 and in consequence the death rate fell for the fourth successive year to reach the level of 12.41 per 1,000 population. The adjusted rate of 14.02 compares with a rate of 11.3 for England and Wales.

The pattern of deaths in the 1960's shows certain fairly well established trends. Infant deaths which are discussed in detail elsewhere in the report reached a record low level at 24.6 per 1,000 live births comparable with a national rate of 20.0. The

infectious diseases for practical purposes have ceased to kill except perhaps for tuberculosis. Cancer accounted for 235 deaths, 17% of the total, of which 59 were related to the lung.

Coronary disease was the cause of 311 deaths, 23% of all deaths, whilst the absence of epidemic infection, and severe climatic conditions and the existence of improved house warming and cleaner air were associated with only 58 deaths from pneumonia and 95 from bronchitis.

For no very clear reason deaths from violence were appreciably less and gratifyingly all of the reduction occurred amongst persons under the age of 65. Of the total deaths 864 or 63% occurred at or over the age of 65 years.

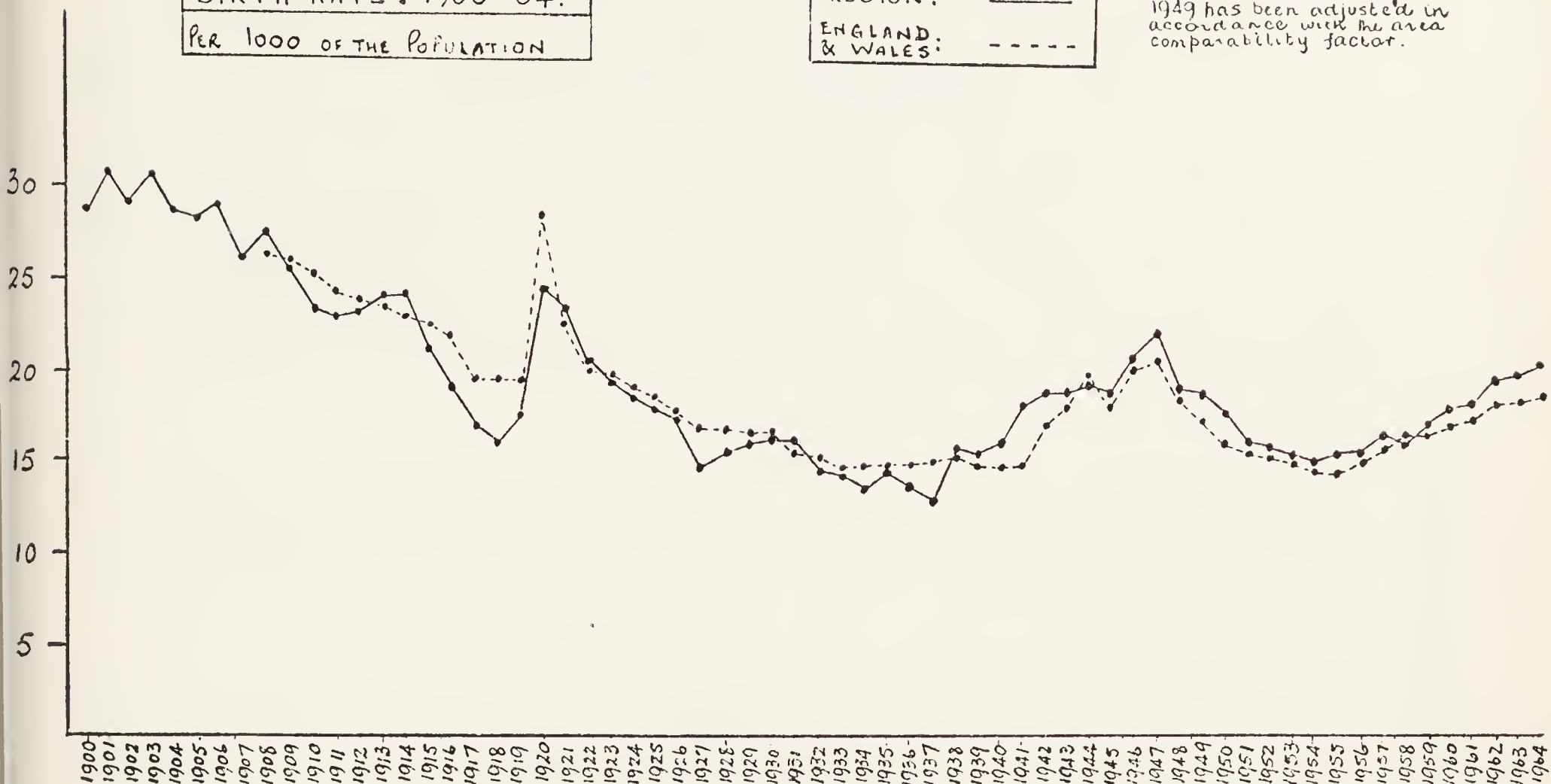
BIRTH RATE: 1900-64.

PER 1000 OF THE POPULATION

PRESTON: —

ENGLAND & WALES: - - - -

The local birth rate from 1949 has been adjusted in accordance with the area comparability factor.



DEATH RATE 1900-64.

PER 1000 OF THE POPULATION

PRESTON: —

ENGLAND & WALES: - - - -

The local death rate from 1934-1940 and from 1949 onwards has been adjusted in accordance with the area comparability factor.

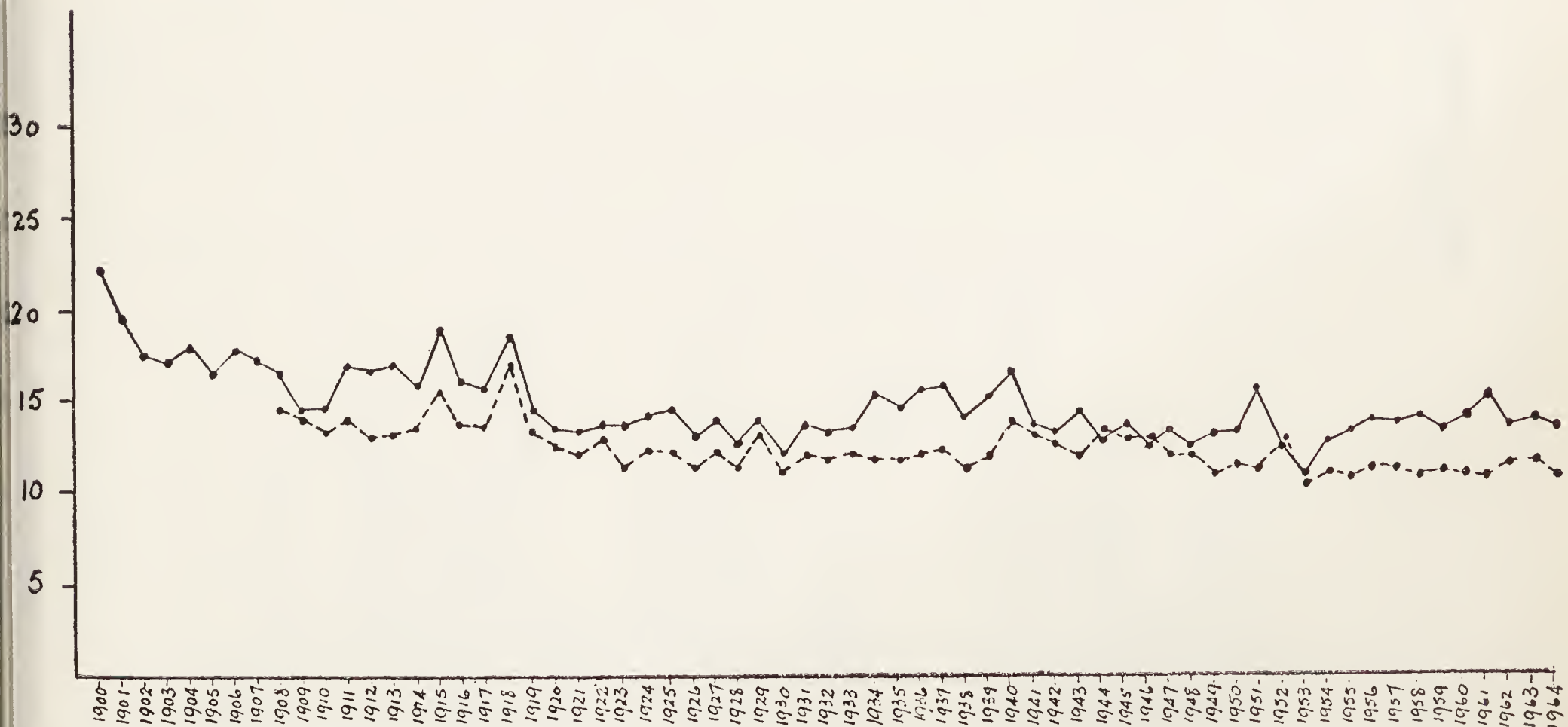


Table 3.
Causes of Death—arranged according to sex and age.

	0— M. F.	1— M. F.	5— M. F.	15— M. F.	25— M. F.	35— M. F.	45— M. F.	55— M. F.	65— M. F.	75— M. F.	Total M. F.
1. Tuberculosis, respiratory ...	—	—	—	—	1	1	1	1	3	1	8 1
2. Tuberculosis, other ...	—	—	—	—	—	—	—	—	—	—	—
3. Syphilitic disease ...	—	—	—	—	—	—	—	—	—	1	1
4. Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—
6. Meningococcal Infections ...	—	—	—	—	—	—	—	—	—	—	—
7. Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—
8. Measles ...	—	—	—	—	—	—	—	—	—	—	—
9. Other infective and parasitic disease	—	—	1	—	1	—	1	—	—	—	1 2
10. Malignant, neoplasm, stomach ...	—	—	—	—	1	1	2	4	11	1	19 23
11. " " lung, bronchus	—	—	—	1	1	1	7	19	14	4	47 12
12. " " breast	—	—	—	—	—	1	—	—	—	—	23
13. " " uterus	—	—	—	—	—	1	—	—	—	—	10
14. Other malignant and lymphatic neo- plasm ...	—	1	—	1	2	5	2	15	15	11	51 50
15. Leukaemia, aleukaemia ...	—	—	—	—	—	1	—	—	1	—	2 1
16. Diabetes ...	—	—	—	—	—	—	—	—	2	—	2 7
17. Vascular Lesions of nervous system	—	—	—	—	—	3	6	16	22	35	79 111
18. Coronary disease, angina ...	—	—	—	—	4	1	23	53	55	42	183 128
19. Hypertension with heart disease ...	—	—	—	—	—	—	—	—	3	2	5 15
20. Other heart disease ...	—	—	—	—	1	2	4	11	10	24	49 85
21. Other circulatory disease ...	—	—	1	—	—	1	1	3	6	10	21 35
22. Influenza ...	—	—	—	—	—	—	—	—	—	1	1
23. Pneumonia ...	7	2	—	1	—	—	4	4	6	11	35 23
24. Bronchitis ...	—	—	—	—	—	1	2	20	26	16	64 31
25. Other diseases of respiratory system	—	—	—	—	—	—	—	2	—	1	3 3
26. Ulcer of stomach and duodenum ...	—	—	—	—	—	—	—	2	4	—	6 3
27. Gastritis, enteritis and diarrhoea ...	5	1	—	—	—	—	1	4	—	—	11 3
28. Nephritis, nephrosis... ..	—	—	—	2	—	—	—	1	—	1	2 7
29. Hyperplasia of prostate ...	—	—	—	—	—	—	—	—	2	—	—
30. Pregnancy, childbirth, abortion ...	—	—	—	—	—	—	—	—	—	—	—
31. Congenital malformations ...	2	—	—	—	—	1	—	—	—	—	2 10
32. Other defined and ill-defined dis- eases ...	16	—	1	2	3	4	5	11	6	12	60 64
33. Motor vehicle accidents ...	—	—	—	3	2	1	1	1	—	2	10 7
34. All other accidents ...	2	1	1	—	—	5	1	1	—	3	14 17
35. Suicide ...	—	—	—	—	2	—	4	2	—	—	10 5
36. Homicide and operations of war ...	—	—	—	1	—	—	—	—	—	—	1
TOTALS ...	32 21 53	4 3 7	3 1 4	9 2 11	16 8 24	25 12 37	64 33 97	170 103 273	186 190 376	184 304 488	693 677 1370

Table 4.
Deaths in Hospitals and Institutions.

	M	F	Total
Preston Royal Infirmary...	133	76	209
St. Joseph's Hospital ...	26	57	83
Ribbleton Hospital ...	10	3	13
Deepdale Hospital ...	25	15	40
Willows Convalescent Home ...	3	—	3
Sharoe Green Hospital ...	89	100	189
Hospitals, other, outside the area ...	29	37	66
Total ...	315	288	603

The figure of 603 deaths in hospitals and institutions represents 44.01% of the total deaths.

Table 5.
Deaths in the various wards.

	Ashton	Avenham	Central	Deepdale	Fishwick	Moorbrook	Park	Ribbleton	St. John's	St. Matthew's	Savick	Tulketh	Totals
Percentage of total Population...	7.8	7.3	8.8	8.5	8.6	8.5	8.1	11.1	6.9	8.5	8.2	7.7	
Under 1 year ...	4	5	5	3	8	9	5	3	3	3	5	—	53
1-2 years ...	—	—	—	—	—	—	—	—	—	1	—	—	1
3-5 years ...	—	—	—	—	2	—	—	—	1	1	2	—	6
6-15 years ...	—	—	—	—	—	1	1	1	1	—	—	—	4
16-25 years ...	—	3	—	3	—	—	1	1	1	—	1	1	11
26-45 years ...	2	8	2	5	5	3	6	8	6	6	6	4	61
46-65 years ...	24	36	28	41	37	42	27	38	26	36	15	20	370
66-75 years ...	42	33	32	28	33	43	27	23	27	33	24	31	376
76 and over ...	53	62	47	42	43	45	35	24	34	40	24	39	488
Total ...	125	147	114	122	128	143	102	98	99	120	77	95	1370

Table 6.
Comparative Annual Numbers and Rates of Births and Deaths.

Year	Population	No. of Births	Rate per 1,000 Living	No. of Infant Deaths	Infant Mortality	Maternal Mortality		Rate per 1,000 Births	Total No. of Deaths	Rate per 1,000 Living
						Diseases and Accidents P.F.	Others			
1900	118,902	3,410	28.67	814	236	2	11	3.80	2,636	22.16
1	113,117	3,418	30.21	737	218	12	13	7.31	2,213	19.56
2	113,766	3,278	28.81	618	188	4	10	4.27	1,998	17.56
3	114,404	3,453	30.18	541	156	3	15	5.21	1,955	17.08
4	115,055	3,314	28.26	609	183	5	12	5.13	2,091	17.83
5	115,721	3,259	28.16	490	150	7	12	5.83	1,906	16.47
6	116,399	3,317	28.49	665	200	2	13	4.52	2,065	17.74
7	117,093	3,124	26.68	495	158	1	11	3.84	2,003	17.10
8	117,799	3,309	27.56	516	156	2	11	3.92	1,975	16.45
9	118,519	3,027	25.54	416	137	5	8	4.29	1,721	14.52
1910	119,253	2,812	23.58	438	156	4	7	3.91	1,758	14.74
1	117,216	2,726	23.25	473	173	2	13	5.50	1,984	16.92
2	117,630	2,753	23.40	342	124	1	4	1.82	1,972	16.76
3	118,070	2,888	23.95	462	160	2	6	2.77	2,043	16.98
4	118,514	2,841	23.97	401	141	2	20	7.74	1,873	15.80
5	118,118	2,546	21.48	395	155	5	7	4.71	2,086	18.63
6	119,611	2,315	19.36	254	109	3	3	2.59	1,774	16.14
7	118,993	2,019	16.96	255	124	1	5	2.96	1,660	15.46
8	118,595	1,906	16.07	213	113	2	4	3.15	1,944	18.36
9	122,168	2,086	17.45	225	110	5	4	4.31	1,760	14.72
1920	122,133	2,984	24.43	301	101	9	13	7.37	1,659	13.60
1	119,900	2,811	23.44	316	112	7	8	5.34	1,595	13.30
2	120,900	2,482	20.53	242	97	3	9	4.83	1,662	13.75
3	121,700	2,426	19.11	238	98	3	8	4.54	1,676	13.77
4	123,100	2,328	18.91	225	97	5	8	5.58	1,714	13.92
5	122,900	2,174	17.69	286	131	6	7	3.22	1,787	14.54
6	124,200	2,160	17.39	195	90	8	9	7.87	1,596	12.85
7	127,100	1,892	14.88	206	109	3	6	4.77	1,785	14.04
8	127,100	1,916	15.07	175	91	3	9	6.27	1,614	12.69
9	126,100	1,967	15.60	205	104	4	8	6.10	1,772	14.05
1930	126,100	1,975	15.66	145	73	9	4	6.59	1,554	12.24
1	120,100	1,881	15.66	165	88	5	5	5.32	1,661	13.83
2	118,500	1,764	14.89	149	84	4	6	5.67	1,547	13.05
3	117,800	1,720	14.60	150	87	4	3	4.07	1,577	13.39
4	117,490	1,670	14.24	115	69	6	14	11.97	1,611	15.24*
5	116,200	1,742	14.99	140	80	3	5	4.59	1,578	14.94*
6	115,200	1,663	14.43	138	83	7	8	8.60	1,624	15.51*
7	113,600	1,590	14.00	123	77	2	2	2.40	1,614	15.90*
8	113,200	1,766	15.60	125	71	3	—	1.62	1,473	14.44*
9	112,800	1,713	15.19	100	58	2	4	3.34	1,535	15.16*
1940	108,500	1,711	15.77	157	91	2	10	7.03	1,745	16.72*
1	111,490	1,925	17.27	137	71	3	4	3.47	1,543	13.84
2	110,000	1,968	17.89	107	54	2	4	2.94	1,506	13.69
3	109,100	1,952	17.89	132	68	2	2	1.98	1,624	14.89
4	108,190	2,032	18.78	120	59	—	1	0.48	1,386	12.81
5	108,480	1,949	17.97	99	51	1	—	0.51	1,514	13.96
6	114,070	2,380	20.86	134	56	—	4	1.68	1,438	12.61
7	116,520	2,574	22.09	178	69	1	—	0.32	1,578	13.54
8	118,130	2,219	18.78	86	39	1	—	0.44	1,491	12.62
9	119,500	2,170	18.16	94	43	1	—	0.45	1,469	12.91*
1950	120,300	2,101	17.46	68	32	—	—	—	1,550	13.39*
1	118,100	1,962	16.61	68	35	—	3	1.49	1,816	15.99*
2	119,200	1,960	16.44	63	32	—	—	—	1,453	12.67*
3	118,900	1,914	16.10	63	33	—	4	2.04	1,354	11.83*
4	118,400	1,823	15.40	50	27	—	1	0.54	1,407	12.83*
5	117,400	1,832	15.60	53	29	—	2	1.07	1,459	13.42*
6	117,200	1,843	15.73	55	30	—	1	0.53	1,449	14.46*
7	116,200	1,933	16.64	67	35	—	2	1.01	1,445	14.43*
8	115,100	1,864	16.19	58	31	—	—	—	1,457	14.56*
9	114,200	1,964	17.20	63	32	—	2	1.00	1,409	14.07*
1960	113,460	2,023	17.83	64	32	—	1	0.49	1,448	14.55*
1	113,170	2,037	17.99	69	34	—	—	—	1,506	15.17*
2	112,130	2,210	19.71	64	29	—	—	—	1,421	14.44*
3	111,670	2,070	18.54	57	27	—	—	—	1,432	14.49*
4	110,390	2,152	19.49	53	25	—	—	—	1,370	14.02*

*The death rate for the years 1934-1940 and 1949 onwards have been adjusted in accordance with the area comparability factor supplied by the Registrar General annually. The figures for other years are crude death rates.

Mr. R. J. Hinnem, Manager, Ministry of Labour, Preston, has supplied the following comments, for which I am grateful.

Employment Situation.

The improvement in the employment situation which commenced in the spring of 1963, continued throughout 1964, and a very high level of employment was achieved in the area. Unemployment was consistently less than the national and regional percentages : and at the end of December 1964 was 1.1% locally, compared with 1.5% nationally and 1.8% in the North West Region.

All industries were fully employed and in many firms a substantial amount of overtime was worked. This was occasioned, to some extent, by a shortage of workers, particularly skilled workers in the Engineering, Construction, and Textile industries.

In the Construction industry, among the major schemes, work continued apace on the Preston-Lancaster branch of the M6 motorway, and the St. Georges Shopping Centre was virtually completed, while large scale conversion and re-development schemes involving demolition and slum clearance, erection of new flats, schools, banks and offices kept the industry at full stretch.

The Engineering industry, largely involved with the manufacture of aircraft and vehicles remained particularly buoyant while the Textile industry also enjoyed a good trading year, and one in which there was no short time working.

Employment Services.

The continuing improvement in the employment situation was reflected in the Exchange's employment services.

During the year 7,136 people were placed in work, an increase of 248 on 1963, while the number of vacancies notified to the exchange also increased.

The Professional and Executive Register, held at Preston, served a most useful purpose. The number of vacancies notified by employers rose, as did the number of applicants placed and in the year over 120 senior posts were filled from it.

The Ministry's Disablement Resettlement Officers were successful in placing the extremely high number of 687 disabled persons in employment. Co-operation was maintained with local hospitals and early resettlement was effected of some 50 disabled persons through the Ministry's Rehabilitation and Training Centres.

The Nursing Employment Officer continued to assist general and psychiatric hospitals in meeting demands for nursing staff.

The Ministry's local advisory committees met quarterly ; the Local Employment Committee (Chairman : Mr. W. Seed) considered many aspects of employment, training and conditions of employment, and advised particularly on some of the legislation introduced in 1964 affecting these, namely

Industrial Training Act.

Offices, Shops, and Railway Premises Act.

Staggering of Holidays.

The Disablement Advisory Committee (Chairman : Dr. P. M. Logan) considered the problems of resettlement of the disabled.

Table 7.
Monthly Unemployed Register, 1964.

1964	Men	Women	Boys & Girls	Total	Temp. Stopped included in total	%
January ...	1140	440	75	1655	117	2.0
February ...	1028	430	49	1507	81	1.8
March ...	871	403	39	1313	9	1.6
April ...	818	386	103	1307	4	1.5
May ...	716	312	43	1071	—	1.3
June ...	627	303	33	963	11	1.1
July ...	602	244	38	884	8	1.0
August ...	696	322	421	1439	42	1.7
September ...	679	316	227	1222	2	1.4
October ...	647	282	91	1020	1	1.2
November ...	639	295	43	977	—	1.1
December ...	669	272	35	976	1	1.1

Mr. Richardson, the Youth Employment Officer, has furnished the following figures in regard to the number of juveniles who were unemployed during the year.

Table 8.
**Number of Unemployed Juveniles
in 1964 and the previous year.**

Month	Boys		Girls		Total	
	1963	1964	1963	1964	1963	1964
January ...	73	38	54	23	127	61
February ...	68	19	42	9	110	28
March ...	55	22	31	10	86	32
April ...	96	51	60	22	156	73
May ...	54	31	26	10	80	41
June ...	53	19	23	13	76	32
July ...	46	19	26	12	72	31
August ...	158	83	71	52	229	135
September ...	109	44	73	33	182	77
October ...	43	27	30	22	73	49
November ...	26	25	27	11	53	36
December ...	18	19	17	11	35	30

General Provision of Health Services for the Area

1. MATERNAL AND CHILD HEALTH.

Statistics.

2,152 live births and 38 stillbirths were registered during the year.

Domiciliary midwives notified 29.09% of the total births, 45.46% were notified from Sharoe Green Hospital and 20.11% from Preston Royal Infirmary.

Investigations into the social circumstances of applicants for admission to hospital confinement continued to be carried out and numbered 161 in respect of Sharoe Green Hospital and 5 for Preston Royal Infirmary. Advice was given that there were reasonable facilities for domiciliary confinement in 75 cases.

Maternal Deaths. No maternal death occurred during the year.

Puerperal pyrexia. 19 cases were notified during the year and 17 of these came from hospitals.

Stillbirths. Total number notified, 37.

Source of notification—

Sharoe Green Hospital...	...	...	...	...	20
Preston Royal Infirmary	...	...	...	...	13
St. Joseph's Hospital	...	...	...	...	3
Domiciliary practice	...	...	...	...	1
Unattended births—local Registrar	...	...	...	...	—

The stillbirth rate of 17.35 per 1,000 related births showed a decrease from the rate of 22.20 that applied in 1963 and compares with the rate of 16.3 for England and Wales.

<i>Infant deaths—</i>	England and Wales	
Total number of deaths of infants under the age of one year	53	
Infant mortality rate per 1,000 live births	24.6	20.0
Number of deaths of infants under one month old	33	
Neo-natal mortality rate per 1,000 live births	15.3	13.8
Peri natal mortality rate per 1,000 total births	28.7	28.2

Table 9.
Infant Deaths.

Cause of Death (Registrar-General's Abridged List)	AGE AT DEATH																Total	
	Days				Weeks		Months											
	0—		1—6		1—3		1 +		2 +		4 +		6 +		9—12			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
23. Pneumonia			1		2		3	1		1	1			1			7	3
27. Gastritis, Enteritis, Diarrhoea					1		1		3								5	—
31. Congenital Malformations		1	1			3	1							1			2	5
32. { Prematurity Asphyxia and Atelectasis Other defined and Ill-defined Causes ...	7	3	2	3		1											9	7
	1	1	2														3	1
	1	1	1			1			2	2							4	3
34. All other Accidents										1		1				2	2	2
Total ...	9	6	7	3	3	5	5	1	5	4	1	1	—	2	2	—	32	21

Premises.

Six ad hoc maternal and child health clinics are now available, a seventh, at Avenham was about ready for occupation at the end of the year and the building of another one was commenced on the Brookfield estate during the year. Additional sessions are also held at Wilson House, at Deepdale and at Savick.

The accommodation for midwifery remains unchanged.

The Midwifery Service.

The Service continues to operate on a policy of efficient ante-natal care, and selective booking for home or hospital confinement. Potential mothers of first babies and mothers who have had four babies or more are encouraged to book into hospital. The remainder are reviewed by the consultant obstetricians at their weekly sessions, and mothers with adverse clinical or social conditions or poor obstetric histories are also urged to accept hospital bookings.

Table 10.
Place of delivery of Preston mothers during 1964.

Place of confinement	Available beds	No. of Preston deliveries
Domiciliary	—	638
Sharoe Green Hospital	53	997
Preston Royal Infirmary	50	441
St. Joseph's Hospital	22	106
Maternity homes	—	1
Other hospitals	—	10
Totals	125	2,193

Staffing.

At the end of the year the local supervising authority was aware of 39 midwives practising in the County Borough, 21 at Preston Royal Infirmary, 6 at St. Joseph's Hospital to which general practitioners have access with their patients, 2 at Deepdale Isolation Hospital and 10, including the supervisor, employed in the domiciliary midwifery service.

Miss D. Jobling, the supervisor of midwives, left the Service on 31st January and Miss M. Hadfield commenced duties as supervisor on 31st March.

In December Mrs. N. Collinson retired after 9 years' service as a domiciliary midwife in the borough. Three midwives appointed during the year had all taken Part II Midwifery training on the Preston district.

In September one midwife commenced the part-time course of instruction at Liverpool Maternity Hospital in preparation for the Midwife Teacher's Diploma of the Central Midwives Board, and in March one midwife attended the relaxation and parentcraft course at Alston Hall.

During the year nineteen pupil midwives from the Christiana Hartley Maternity Hospital received Part II district midwifery training from the hostel at 5 Walton's Parade. All were successful in the Part II examination of the Central Midwives Board. Five of the domiciliary midwives are approved district teachers.

Pupils receiving Part I midwifery training at Preston Royal Infirmary also attended the Parentcraft discussions.

Care of the mother.

The departmental medical staff carry out routine ante-natal clinics weekly at the seven clinics which the district midwives attend. The midwives have also attended the monthly ante-natal clinic held at the surgery of one group practice of doctors throughout the year, and in addition do a considerable number of ante-natal home visits to

their booked patients. Indian and Pakistani mothers particularly need extra help and advice. A weekly consultant clinic is held at Saul Street clinic attended regularly by the two consultant obstetricians. Every booked case is referred to this clinic at least once between the 34th and 36th weeks of pregnancy or as the need arises.

During the year 1,068 mothers made 4,992 attendances, as against 1,088 mothers making 5,308 attendances in 1963. 652 expectant mothers attended the consultant clinics for the first time and 181 re-attended in 1964.

Routine blood specimens are taken from all mothers on first attendance for haemoglobin estimation ; blood grouping and serological examinations, and again at 30-34 weeks, or as necessity arises. Regular recordings of blood pressure, weight and urine analysis are also made.

Parentcraft and relaxation classes are held weekly at Saul Street clinic. Relaxation and ante-natal exercises are taught by the physiotherapist at an afternoon session to mothers booked for domiciliary confinement or for St. Joseph's Hospital. Parentcraft groups are organised by the supervisor of midwives for these mothers and by arrangement for mothers booked for Preston Royal Infirmary.

Nine courses were held consisting of afternoon and evening sessions for five weeks. The programme is shown below :—

1. Talk, "Elementary Embryology," illustrated by Birth Atlas.
Film, "Nutrition in Pregnancy."
2. Film, "To Janet a Son." This session is very popular with potential fathers.
3. Practical demonstration, "Baby bathing."
Discussion, "Layette and Equipment."
4. Infant feeding. Film demonstrating methods of feeding and preparation for breast feeding.
5. Talk on artificial feeding and weaning.
Film, "Tailored for Timothy."

129 attendances were made by fathers.

Trilene was administered on domiciliary practice to 542 mothers. Gas and air analgesia was not used. Pethidine was used in 340 deliveries and 651 accouchement outfits were provided. The services of the hospital flying squad were used once. The Oxygennaire apparatus was not used. All Preston domiciliary midwives carry oxygen "sparklet" resuscitators as part of their delivery equipment.

Almost all mothers now book the family doctor for confinement in addition to the midwife and medical aid in the terms of the Central Midwives Board rules was requested in fourteen instances only.

Results.

During 1964 2,193 babies were born to Preston mothers. 638 domiciliary deliveries occurred, 29.1% of the total deliveries of which 556 were delivered by midwives, the remaining 82 being delivered by or in the presence of a doctor.

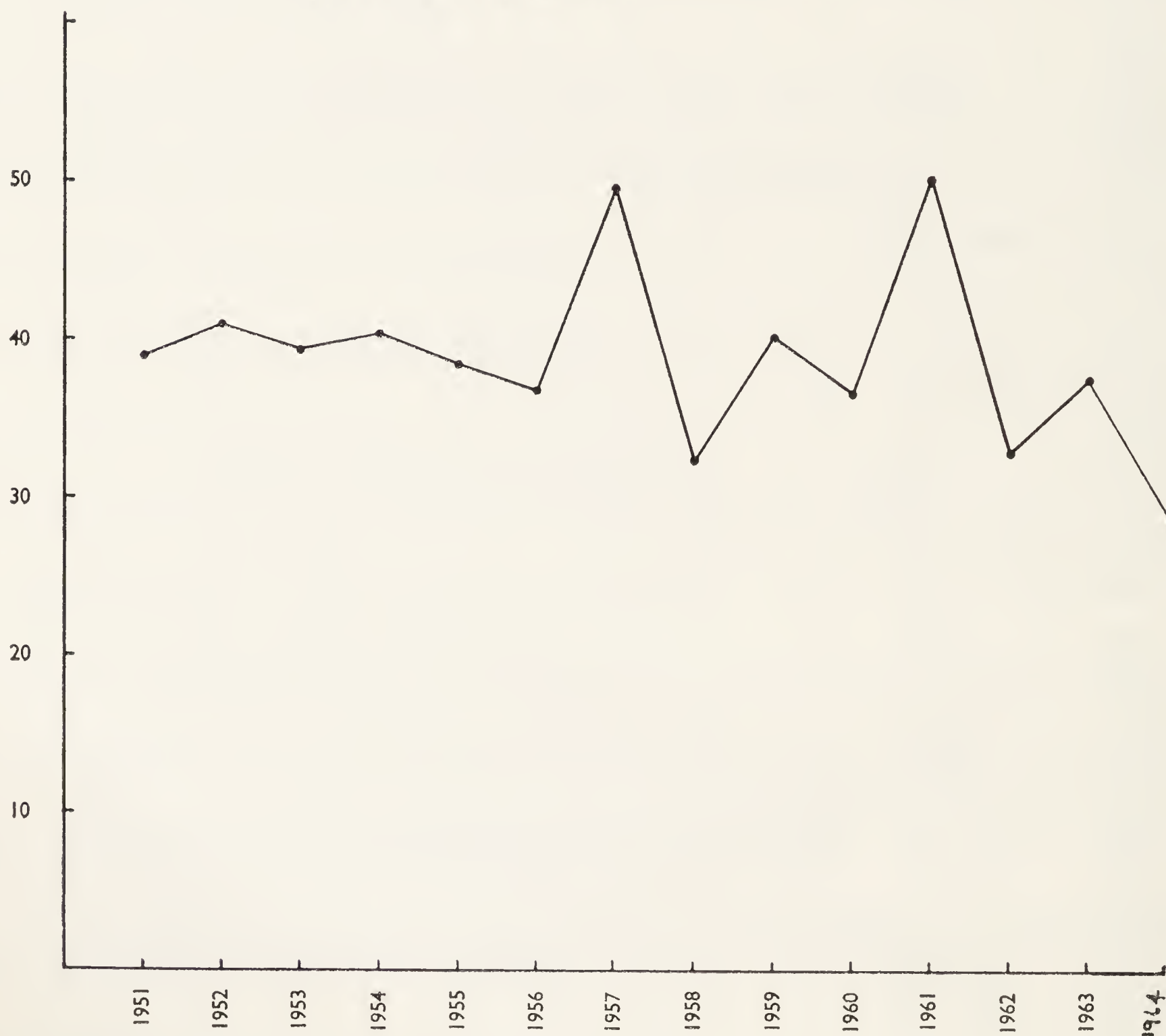
Table 11.
Total confinements and distribution of these confinements between hospitals and nursing homes, general practitioners and midwives for fifteen years since 5th July, 1948, and attendances at Corporation clinics.

Year	DOMICILIARY CONFINEMENTS					CLINICS						
	Hospital confinements	Domiciliary confinements	Total confinements	% domiciliary confinements to total	Midwives		Midwives with Doctors Present		No. of persons who attended	Total No. of attendances at clinics	Average attendance of each person	Ratio of persons attending to total domiciliary confinements
					Number attended	% of total domiciliary confinements	Number attended	% of total domiciliary confinements				
1	2	3	4	5	6	7	8	9	10	11	12	13
1948 (from July)	829	270	1,099	24.57	172	63.7	98	36.3	222	690	3.11	82%
1949	1,639	574	2,213	25.94	350	61.0	224	39.0	777	2,994	3.85	135%
1950	1,669	487	2,156	22.59	323	66.3	164	33.7	602	2,798	4.53	124%
1951	1,530	454	1,984	22.88	302	66.5	152	33.5	620	3,023	4.88	137%
1952	1,511	508	2,019	25.16	321	63.3	186	36.7	667	3,311	4.97	132%
1953	1,454	548	2,002	27.37	424	77.6	122	22.4	770	3,891	5.05	141%
1954	1,422	487	1,909	25.50	366	75.2	120	24.7	712	3,793	5.16	146%
1955	1,527	350	1,877	19.18	297	84.9	52	14.9	727	3,593	4.94	208%
1956	1,526	373	1,899	19.64	310	83.1	63	16.9	670	3,142	4.69	180%
1957	1,641	391	2,032	19.24	354	90.5	37	9.5	758	3,451	4.55	194%
1958	1,442	471	1,913	24.62	425	90.2	46	9.8	747	3,981	5.33	158%
1959	1,486	551	2,037	27.05	506	91.8	43	7.8	934	5,050	5.41	170%
1960	1,457	603	2,060	29.27	554	91.9	44	7.3	973	5,076	5.20	161%
1961	1,548	585	2,133	27.42	521	89.7	60	10.3	1,026	5,695	5.55	175%
1962	1,558	713	2,271	31.39	605	85.2	105	14.8	1,167	6,546	5.61	164%
1963	1,481	638	2,119	30.11	557	87.3	81	12.7	1,088	6,174	5.67	170%
1964	1,555	638	2,193	29.09	556	87.1	82	12.9	1,068	5,825	5.45	167%

No Preston mother has died in childbirth for nearly five years. 38 babies were stillborn giving a stillbirth rate of 17.35 per 1,000 total births. 15 babies failed to survive the first 24 hours of life and a further 10 died before reaching the age of one week. The perinatal mortality rate is 28.77 per 1,000 total births which compares with a rate for England and Wales of 28.2 and a local rate for the previous year of 37.3

The following graph shows the trend of perinatal mortality in Preston over the past 14 years.

PERINATAL MORTALITY RATES : 1951-1964



The magnificent work of the Preston midwifery service is demonstrated by the results obtained. More than 11,000 deliveries have taken place since the last maternal death. Perinatal mortality is the lowest ever achieved in Preston, is a continuance of a falling trend in a period of high birth rate and is amongst the lowest in the north west.

The Child Health Service.

The quality of child health is steadily improving, our knowledge of its significance is advancing and throughout the years the training of staff has been moulded to meet the evolving situation. With the provision of special interview rooms for health visitors in the new clinics it has now been possible for the health visitors to provide, as routine practice, in private consultation with individual mothers advice on the care of the infant of such a standard as to relieve the medical staff of this form of consultation. These doctors over the past year have been concentrating on the regular examination of infants and young children for the determination of features of development and the charting of progress in each child. This form of examination is time consuming and demanding on the powers of discernment but increasing experience is demonstrating its value both in helping the parent to understand her growing child and in providing earlier ascertainment of actual or potential insufficiency.

This extension to an earlier age of the principles that have applied to the examination of toddlers at their special clinics completes the picture of child development from birth to school leaving age.

Clinics.

Ten and a half medical sessions and one non-medical session are held weekly throughout the town, 38,169 attendances being made by 4,533 children, as compared with 31,127 and 4,276 in 1963. The attendances continue to increase and reflect the value of the work of the staff and the popularity of the service. On the "at risk" registers at the end of the year 377 children were undergoing special observation.

Table 12 shows the numbers of toddlers attending the various centres during the year.

Table 12. Toddlers' Clinics, 1964.						
Clinic			No. invited	No. who attended		No. referred for specialist treatment
						No. referred for observation
Greenbank	..	..	227	130	57.3%	—
Cuttle Street	..	..	146	86	59.0%	—
Deepdale	..	..	242	137	56.6%	6
Ribbleton	..	..	260	96	37.0%	9
Waltons Parade	..	..	253	124	49.0%	2
Tulketh Road	..	..	169	60	35.5%	3
Saul Street "A"	..	..	246	86	35.0%	8
Saul Street "B"	..	..	242	113	46.7%	7
Totals			1785	832	46.61%	35
						15

Welfare Foods.

National dried milk, orange juice, cod liver oil and vitamin A and D tablets were sold at the welfare foods' centre at Saul Street clinic and at the eight child health centres in the town. The following table shows the quantities distributed :—

			<i>National dried milk</i>	<i>Orange juice</i>	<i>Cod liver oil</i>	<i>A & D</i>
Welfare Foods centre, Saul Street...	...	...	8,151	8,831	722	1,082
Child health centres	...	...	3,907	11,025	1,060	689

In addition proprietary brands of dried milk, cereals, rose hip syrup and other nutrients are sold to mothers who attend, with their infants, at the child health centres.

During the year food to the value of £7,766 was sold. The supply of free nutrients cost the Council £211.

Day Nurseries.

The number of places in the nurseries remains unchanged, 60 for children under two years of age and 83 for those from two to five years, a total of 143. The number of attendances has increased by 3.3 per cent and the average daily attendance from 128 to 130, a smaller increase than in 1963, but one that still reflects the increased amount of employment available for women.

The largest increase has been at Hartington Road where the attendances have gone up by nearly 600. This is due to the car service from Eldon Street, which has continued throughout the year, with an average of four to five children travelling daily. The main drawback to this service is the lack of personal contact between the parents of the children concerned and the nursery staff, as the mothers rarely make the effort to go and see where their children are cared for during the day. It is also difficult to transport the very young children in the car. The service, however, has enabled several children on the priority list at Eldon Street to be admitted earlier than would have been possible otherwise.

There is always a heavy demand for places at Eldon Street, due to the fact that the neighbourhood is fairly heavily populated and several works in the area employ a large amount of female labour. The average daily attendance at the nursery has been 41, one above the number of places, a marked contrast to the other two nurseries where the average attendance is seven below the places available in each case.

The nurseries have all had their share of the usual childhood infections during the year. Early in the year there was an outbreak of rubella in all three nurseries. They were all involved in a measles epidemic, beginning with Isherwood Street prior to the summer holidays and the other two nurseries in the late autumn. Hartington Road also had a few cases of dysentery and an outbreak of chickenpox, but no case of either infection occurred in Eldon Street in spite of the twice daily contact between the two nurseries.

The number of cases in the nurseries on social grounds has shown little change. 102 children were on reduced fees varying from 6d. to 9s. 6d. Only one family of three children were in free of charge and the circumstances were exceptional. The number of short-stay cases was 40, a slight increase. The majority of these children are those whose mothers are ill or have gone into hospital for confinement and vacancies are

always made available for them. The nurseries have also been able to help in other emergencies, for instance, when children have been found by police alone in the house or both parents have had to attend court.

Several children have been in the nurseries for short periods, in three cases to enable mothers to attend hospital for treatment. In another instance three children were taken in for one day so that the mother could visit her baby in Liverpool Children's Hospital. Three children of one family were admitted because the mother is completely blind and the father has only very little sight. The vision of these three children is affected and two are only partially sighted. The nursery staff have worked hard with them, as when they were first admitted they had little idea of any of the niceties of life and their habits were quite unacceptable. At first the parents were most unco-operative, but the mother now visits the nursery whenever she can find anyone to accompany her and it was a great joy to her when one of the children had a part in the nativity play.

One young child with normal hearing, whose parents and grandparents were all profoundly deaf, came to the nursery for two days a week so that she might hear normal speech and learn to talk.

There is a very good liaison between the nurseries and the health visitors, children's office, almoners, police and N.S.P.C.C. inspectors.

Many different people have visited the nurseries, some, such as health visitor students, to gain practical experience, and others merely out of interest or to enable them to write a thesis, as in the case of student teachers. There are many requests for visits from schools where the children are taking mothercraft courses. Numbers do sometimes have to be limited, but whenever possible the girls see the nurseries.

Table 13.
Summary of Statistics, 1964.

	Eldon St.	Harting- ton Rd.	Ishe- wood St.	Total
Attendances	10,086	10,084	12,017	32,187
New children admitted...	51	77	56	184
Children left	53	86	60	199
On Register—				
January 1st	47	57	60	164
December 31st	45	45	56	146
On Waiting List—				
January 1st	10	—	10	20
December 31st	26	14	19	59
INFECTION :				
Measles	30	35	42	107
Rubella	12	30	29	71
Chicken Pox	—	31	1	32
Whooping Cough	—	1	—	1
Mumps	10	1	—	11
Dysentery	—	7	—	7
Scarlet Fever	—	—	1	1
Gastro-Enteritis	—	—	—	—
Hepatitis	—	—	—	—
Influenza	—	—	—	—

Table 14.
Children attending the day nurseries on Social Grounds 1964.

	On register on December 31st, 1963	On register at any time during 1963 (including previous column)
Parents separated or divorced	23	41
Mother widow	—	4
Father widower	—	—
Mother unmarried	23	35
Mother in hospital or ill	4	23
Father in hospital	—	3
Father in Prison	2	7
Father continually unemployed	3	9
Poor housing conditions	23	51
Children with speech defects	3	6
Children physically handicapped	4	6
Maladjusted children or parents	9	16
Any other reason	2	6
Total	96	207

Number of 'short stay' children admitted during the year 40

Nursery Nurses' Training Scheme.

Nursery nursing continues to be a popular career among girls from both grammar and secondary modern schools. This year there were 37 applicants for the six places available. Under the new training regulations all students appointed after July 1965 must be 16 years of age when they begin the course. This will make very little difference to the present situation, as more and more of the girls applying have stayed on at school the extra year to take G.C.E. Only one girl appointed this year was under sixteen, whereas five years ago there were only two who were sixteen.

All three nurseries are recognised by the Ministry of Health as training nurseries for the purposes of training for the National Nursery Examination Board certificate and sixteen girls were in training during the year. The course is run in conjunction with the Education Department and two days a week are spent at Alston Hall Day Continuation College doing the theoretical side of the training. The students have lectures on both vocational and general subjects and opportunity is given for them to take various subjects for the General Certificate of Education. Some of them take the examination for the first time, others are able to take again those subjects in which they failed at school, or to take an extra subject.

Many interesting visits are arranged for the students. During their first year of training they go to a dairy, the refuse disposal units at Freckleton and Argyll Road, and to the farm, dairy and laboratory at the Institute of Agriculture at Hutton. During the second year they visit the Child Guidance Centre, the Junior Training

Centre, the nursery section of the Royal Cross School for the Deaf, the Spastics centre and the Open Air School. They also go out with a Health Visitor and spend an afternoon at a child welfare clinic.

Six students sat for the final of the National Nursery Examination Board and five of them gained their certificate. Five of these have remained in nursery work, two in the day nurseries and three in nursery wings. The sixth went to the Royal Liverpool Children's Hospital to take the combined sick children's and general training.

Health Visiting.

At the end of the year there were twenty-three whole-time and two part-time health visitors on the staff, together with the superintendent and her deputy.

There were two resignations and one appointment during the year. Although still under establishment the staff position has not deteriorated in the past two years.

The two students who commenced training during the previous year returned in July as qualified health visitors. In September three students commenced training at the Technical College, Bolton.

The pressure of work and the demand on the health visitors' time has been great. The pattern of domiciliary visiting continued, in its changing lines. Whilst considerable emphasis is still placed on the care of the child under one year of age an increasing amount of time is devoted to the care of the elderly, the severely handicapped, the child "at risk" and families with social problems.

Inevitably, as the Corporation's slum clearance programme has been pursued there has been a considerable movement of families. This has meant, in the majority of cases, movement to a new area under the supervision of a different health visitor. Making the acquaintance of "new" families in fresh surroundings has been very time consuming for some of the staff.

This shifting of population within the borough has created disparities in case loads calling for re-organisation of areas. As the clearance scheme draws to an end these difficulties will gradually disappear and areas will once again become static and continuity of work will be smoother.

At one time a basis for a health visitor's case load was the number of children under five years of age residing in her area. As a result of the changing pattern of work this basis no longer applies. Instead, in arriving at a suitable case load consideration must be given to the number of families in an area.

At 31.12.64 there were actual records of 8,983 children 0-5 years, 701 0-5 years transferred out of the borough during the year. This figure of 8,983 represented a total of 6,188 families. In addition to these families a further 1,785 families were under supervision because of members who fell into one or other of the following categories :

- (1) tuberculosis, (2) physically disabled, (3) the elderly.

Thus a total of 7,973 families fall within the supervision of the health visitor.

Liaison.

The changing pattern within the health visiting field has created the need for close liaison with workers other than those within her immediate department. There is a constant contact with the Children's Department, Probation Service, National Assistance Board, hospital medical-social worker, Electricity and Gas Undertakings, Moral Welfare Officers, the N.S.P.C.C. and other voluntary organisations. Help is sought and problems discussed, usually by telephone. To do this in person would be much more satisfactory, but the amount of time involved would be prohibitive.

The medical-social workers referred 205 patients for health visitor supervision—that is, patients discharged from hospital or who had been seen in the out patient department and referred for after care in some form.

Co-operation with general practitioners has not increased. The same nucleus of some nineteen have made infrequent contact with the department. In reverse, however, the interchange has been greater and health visitors have made frequent referrals to the practitioners. Whilst it would be gratifying if the family doctors would further seek the aid of the health visitor, at the present time and with the staff available such demands could only effectively be met at the expense of some other aspect of the health visitors' duties.

The health visitors' hands are full and a close look is needed at the present establishment, not only if the service is to be extended, but if the present requirements are to be continued to be met.

<i>Cases visited by health visitors</i>							<i>No. of Cases</i>
1. Children born in 1964	...	...	...	...	...	...	2,232
2. Children born in 1963	...	...	...	...	...	...	2,023
3. Children born in 1959-62	...	...	...	...	...	...	5,429
4. Total number of children in lines 1-3	...	...	...	...	...	...	9,684
5. Persons aged 65 or over	...	...	...	...	...	...	169
6. Number included in line 5 who were visited at the special request of a G.P. or hospital	...	...	...	...	...	...	161
7. Mentally disordered persons	...	...	...	...	...	...	7
8. Number included in line 7 who were visited at the special request of a G.P. or hospital	...	...	...	...	...	...	—
9. Persons, excluding Maternity cases, discharged from hospital (other than mental hospitals)	...	...	...	...	...	...	205
10. Number included in line 9 who were visited at the special request of a G.P. or hospital	...	...	...	...	...	...	192
11. Number of tuberculous households visited	...	...	...	...	...	...	381
12. Number of households visited on account of other infectious diseases	...	...	...	...	...	...	1,154

Care of Premature Infants

Table 15 shows the number of children born prematurely and their survival state up to 28 days after birth.

Table 15. Premature Infants Survival State.					
Birth Weight	Died within 24 hrs. of birth	In 1 & under 7 days	In 7 & under 28 days	Sur- vived 28 days	Total
Babies born at home and nursed at home—					
2 lbs. 3 ozs. or less	—	—	—	—	—
2 lbs. 4 ozs. to 3 lbs. 4 ozs.	—	—	—	—	—
3 lbs. 5 ozs. to 4 lbs. 6 ozs.	—	—	—	1	1
4 lbs. 7 ozs. to 4 lbs. 15 ozs.	—	1	—	3	4
5 lbs. to 5 lbs. 8 ozs.	—	—	1	16	17
Total	—	1	1	20	22
Babies born at home and transferred to hospital—					
2 lbs. 3 ozs. or less	—	—	—	—	—
2 lbs. 4 ozs. to 3 lbs. 4 ozs.	1	—	—	—	1
3 lbs. 5 ozs. to 4 lbs. 6 ozs.	—	—	—	3	3
4 lbs. 7 ozs. to 4 lbs. 15 ozs.	—	—	—	3	3
5 lbs. to 5 lbs. 8 ozs.	—	—	—	1	1
Total	1	—	—	7	8
Babies born in hospital—					
2 lbs. 3 ozs. or less	4	1	—	1	6
2 lbs. 4 ozs. to 3 lbs. 4 ozs.	3	3	2	4	12
3 lbs. 5 ozs. to 4 lbs. 6 ozs.	2	3	—	16	21
4 lbs. 7 ozs. to 4 lbs. 15 ozs.	1	1	—	31	33
5 lbs. to 5 lbs. 8 ozs.	—	—	1	67	68
Total	10	8	3	119	140
Babies born in private maternity homes—					
2 lbs. 3 ozs. or less	—	—	—	—	—
2 lbs. 4 ozs. to 3 lbs. 4 ozs.	—	—	—	—	—
3 lbs. 5 ozs. to 4 lbs. 6 ozs.	—	—	—	—	—
3 lbs. 7 ozs. to 4 lbs. 15 ozs.	—	—	—	—	—
5 lbs. to 5 lbs. 8 ozs.	—	—	—	—	—
Total	—	—	—	—	—
GRAND TOTALS	11	9	4	146	170

Lectures.

HOSPITAL TRAINING SCHEME.

During the year six lectures were given to student nurses in the Joint Preliminary Training School at Brindle Lodge. This is two fewer than in previous years because there has been a change in the method of intake of students into training and there are now two periods of entry in the year instead of three.

At the Royal Infirmary six lectures were given to the students in their final year of training and thirty-nine students spent a half day each with the health visitors gaining some insight into the work done in the home.

LECTURES IN SCHOOLS.

Health visitors gave lectures in mothercraft at St. Augustine's Girls, St. Gregory's and Blessed John Southworth Schools. A series of six lectures was given in each case to senior girls.

MEETINGS WITH OUTSIDE GROUPS.

A senior member of the health visiting staff spoke to the local Citizens Advice Bureau on "The Newer Aspects of Health Visiting."

A similar talk was given to members of the Preston Ladies Circle.

STUDENT HEALTH VISITORS.

Since 1950 students undergoing training at Bolton Technical College have attended the department for the purpose of practical instruction and again two students attended. They see not only the work of the health visitors' section, but also that of the mental health, welfare and public health inspectors' sections.

In September, 1965, when the Health Visitors Training Council takes over the responsibility for health visitor training and the new syllabus comes into being there will be changes not only in the theoretical training but also in the system of practical training. At the present time it is the practice for any senior health visitors with experience to give practical instruction. In the future it is suggested by the training council that selected health visitors be designated as fieldwork instructors and that these health visitors should attend a special refresher course organised for this purpose. This change to a nucleus of field workers is made with a view to providing greater depth in practical experience.

In anticipation of these changes an attempt has been made, in some measure, to carry out practical training on these lines in the current year.

VOLUNTARY CLUBS AND CLASSES.

Parents clubs, the first of which was started in Avenham in 1952, now exist at Ribbleson since 1962 and at Greenbank from the current year. These have proved a fruitful outlet for health education activities and for giving mothers an opportunity of discussing parental difficulties and family problems at an informal level.

Over 60's clubs now exist at both Ribbleson and Greenbank clinics and parentcraft classes continue to be held by the superintendent midwife at Saul Street clinic.

These evening meetings of men and women interested in a healthy way of living are an example of the use to which clinic premises may be put for the benefit of the health of the people.

Free facilities for the holding of meetings are provided especially at Saul Street clinic to a wide variety of voluntary organisations associated with health and sickness.

Miscellaneous Services.

Audiology Clinic

Table 16

Results	Age Groups (years)			Total
	0—1	1—5	5—15	
Referred to E.N.T. clinic				
(a) Hearing loss	—	3	1	4
(b) Other causes	—	5	1	6
No Hearing Loss :				
Discharged	—	32	7	39
For review :				
(a) Speech defect	—	20	—	20
(b) Mental defect	—	2	—	2
(c) Other Causes	1	28	—	29
Total	1	90	9	100

The Audiology Clinic was held at Saul Street Clinic in 1964. The number of new cases was 55 and 45 were reviews from the previous year. 32 cases were referred by the assistant medical officers and the paediatrician, 20 by health visitors, two from the Ear, Nose and Throat clinic and one by the educational psychologist.

One child was found to be profoundly deaf and was issued with a hearing aid. Her home was equipped with a speech auditory trainer and thus she is enabled to have speech training in her own home following guidance at the clinic.

Dental Treatment.

Mr. A. Kershaw, the Senior Dental Officer, has supplied the following report :

“It is evident that dental education is having a decided effect on this service. Most expectant and nursing mothers have attended practitioners under the National Health Service.

Pre-school children are also, in many cases attending for treatment, although this is mostly limited to emergency extractions.”

The figures are in Table 17.

Table 17.
No. of patients provided with dental treatment and form of treatment given.

	Expectant and nursing mothers	Children under 5 years
Examined	9	20
Needing treatment	9	19
Treated	9	18
Made dentally fit	4	12
Extractions	12	46
Anaesthetics—Local	4	1
General	5	13
Fillings	3	12
Scaling and gum treatment	—	—
Silver nitrate treatment	—	4
Dressings	1	2
Radiographs	—	—
Dentures provided—		
Complete	2	—
Partial	—	—
Dentures re-lined	—	—
Attendances by Patients	17	37

Ear, Nose and Throat Clinic.

Facilities for the diagnosis and treatment of ear, nose and throat conditions exist through the clinic run as part of the School Health Service. The following is a summary of the work done for pre-school children :—

New cases	...	...	...	...	22
Re-inspections	...	...	...	...	28
Referred for :					
Operative treatment...	...	...	...	...	13
Treatment in clinic	...	...	...	...	2
Observation	...	...	...	...	18
X-ray	...	...	...	...	4
Audiometer Test	...	...	...	...	7
Deaf Aid	...	...	...	...	—
Treatment :					
Operative	...	...	...	...	1
Clinic	...	...	...	...	2
Total attendances	...	...	...	...	50

Ophthalmic Clinics.

The majority of pre-school children dealt with were seen at the squint clinic. The following is a record of the work done on pre-school children during the year :

Number of children dealt with	...	94
New cases	... ..	44
Refractions	... ..	44
Re-inspections	... ..	113
Prescriptions given	... ..	19
Referred for :		
Operative treatment...	... ..	5
Orthoptic treatment...	... ..	2
Total attendances	... ..	157

Orthopaedic Clinic.

The following is a record of the work done on pre-school children during the year at the Orthopaedic Clinic at the Open Air School :

Number of children under treatment	... ..	20
New cases	... ..	11
Total attendances...	... ..	26
Referred for X-ray	... ..	1
Recommended admission to hospital	... ..	—
Surgical appliances, etc., supplied	... ..	4
Classification of defects dealt with :		
Congenital deformities...	... ..	—
Other deformities	... ..	20

Paediatric Clinic.

Pre-school children referred to the Paediatric Clinic at the Open Air School numbered 17 in 1964.

Total attendances	... ..	40
Number attending	... ..	27

Physiotherapy.

A full-time physiotherapist was appointed in September and her duties were divided between the domiciliary and school health services. Of seven domiciliary sessions per week one was allotted for a relaxation class for ante-natal mothers, and six for home visits to patients not receiving treatment in hospital.

It had been felt that a considerable number of patients, particularly elderly ones with strokes, were not receiving any form of physiotherapy and that this had a detrimental effect on the prognosis. Many cases were too ill to travel to hospital regularly, particularly in the early stages.

A survey of patients known to the district nurses showed that out of a total of 45 strokes cases only a third had ever been in hospital and less than half had received any physiotherapy.

It was hoped that a physiotherapist working in conjunction with the home nursing service, with the agreement of the family doctor, could achieve several aims. These included : give treatment early and so prevent deformities and patients becoming bedridden ; give confidence and encouragement to patients and accelerate rehabilitation ; help the relatives to adapt to the situation and show them how to apply simple but frequent physiotherapy themselves ; and finally to assist patients to come to terms with their disabilities in their own homes.

It is too early to assess the results of the new service but reports have been favourable and there has been an increasing number of requests initiated by family doctors themselves.

At the end of the year 58 expectant mothers had made 209 attendances at the relaxation classes. Thirty cases had commenced physiotherapy at home and eight of these had been discharged. A total of 370 visits had been made to these patients who were mainly stroke cases, some of long standing, but other conditions included were rheumatoid arthritis, osteo-arthritis, amputations, Parkinsonism and disseminated sclerosis.

II. HOME NURSING.

The tables at the end of this report classify the work carried out by the district Nurses during the year, the number of new patients being 1968, making a sum total of 2,593 patients who received treatment in 1964. In addition to the 74,347 visits paid by the nurses to patients in their homes, 980 visits were made by patients to the special clinic which is held each weekday evening at 4 Waltons Parade.

The late evening service for the purpose of administering morphia and similar drugs to the very ill patients continues to operate, 753 visits being paid during the year. Visits to children under 5 years totalled 566, while visits to patients over the age of 65 years totalled 44,436. To many of the latter, the continued use of the incontinence pads is greatly appreciated and most helpful in the nursing of these patients.

Arrangements have now been made for the Marie Curie Foundation Scheme, which assists in the care of patients suffering from cancer, to be put into operation.

During the year, two nurses took the district nurse training course and were successful in obtaining the certificate of the Queen's Institute of District Nursing and the National Certificate.

LEARNING
TO WALK AGAIN



A SPECIAL
TYPE OF HOVERCRAFT

Table 18.
Summary of the work of the District Nurses.

	No. of cases at beginning of month	New cases	Terminated				No. of cases at end of month	No. of visits
			Re- covered	Hosp.	Died	Other causes		
January ...	625	177	102	33	33	14	620	6,578
February ...	620	144	87	27	26	7	617	5,585
March ...	617	182	119	29	28	7	616	6,248
April ...	616	169	98	37	22	7	621	6,192
May ...	621	146	82	23	14	12	636	5,911
June ...	636	157	83	36	22	11	641	6,219
July ...	641	157	98	25	21	20	634	6,351
August ...	634	136	86	34	17	10	623	5,877
September ...	623	171	85	27	21	18	643	5,964
October ...	643	168	100	30	19	16	646	6,360
November ...	646	169	93	21	23	9	669	6,304
December ...	669	192	123	35	30	17	656	6,758
Total for year	—	1,968	1,156	357	276	148	—	74,347

Table 19.
Visits paid by district nurses in each of the past five years.

Year	First visits.	Total visits
1964	1,968	74,347
1963	1,830	71,960
1962	1,687	72,267
1961	1,695	72,469
1960	1,859	77,425

Table 20.
Conditions dealt with by District Nurses during the year.

	Number of cases	Number of visits
Heart disease	208	6,288
Cancer	128	4,092
Cerebral vascular disease..	185	7,264
Blood diseases	369	8,402
Diabetes	56	11,020
Tuberculosis	55	2,662
Other chest diseases ...	263	4,553
Other infectious diseases...	41	299
Post operative cases ...	194	3,826
Fractures	31	1,294
Varicose ulcer of leg ...	60	2,690
X-ray preparation ...	128	240
Local infection	93	1,983
Constipation	96	700
Complications of pregnancy	87	755
All other conditions ...	599	18,279
Total ...	2,593	74,347

Table 21.
Cases of Infectious Disease and complications of pregnancy visited during the year by district nurses.

	Number of Cases	Number of Visits
Pneumonia (all forms)	45	812
Tuberculosis	55	2,662
Influenza	10	111
Tonsillitis	29	180
Erysipelas	2	8
Threatened Miscarriage	1	1
Twin Abortion	1	6
Anaemia of Pregnancy	68	598
Puerperal Pyrexia	4	29
Breast Abscess	3	37
Puerperal Sepsis	1	4
Mastitis	2	11
Caesarian Section	2	19
Gonorrhoea	1	9
Contact of Gastro Enteritis..	1	12
Contact of German Meas'les..	3	29
Total	228	4,528

III. HOME HELP AND NIGHT ATTENDANT SERVICE.

The home help service continues to operate in relieving the needs in homes of the sick. The service is supervised by a Home Help Organiser who visits each home to ascertain the degree of illness, the help available in the family and the amount of help needed in each case. Priority is given to maternity cases, elderly, infirm and chronic sick and also to cases of sudden incapacitating illnesses in the home.

There is a staff of 95 home helps to carry out these duties and each one is given the work for which she has the most aptitude and capability. The average number of monthly cases was 804 and the amount of time given to each case was from three to eight hours a day according to the degree of assistance needed. The present charge of 3s. 0d. per hour can be reduced in accordance with a prescribed scale of charges.

One of the most beneficial and outstanding factors of the past year has been the rehousing of the elderly and sick people from the clearance areas into the new centrally heated bungalows and flats. These are free from the dangers of the open fire and above all free from the dirt, dust and grime which inevitably accumulates from the open fire. They are also free from the soot which used to cling to the inside walls of the chimneys and the inevitable gust of wind which blew the soot down the chimney and into the house, lodging itself indiscriminately on furnishings and uncovered food and enabling it to be breathed into the lungs of the sick and elderly. In contrast to this they now live in conditions of safe, clean heating where the home is bright and clean and not constantly fouled with soot and smoke. One old lady rightly described her new home as "Paradise." It is a pleasure to see them in these changed surroundings.

Warwick House has been a God-send to many old people. Whilst retaining the privacy of their own homes they can also enjoy the facilities of the communal lounge, thus obviating what can be, in some cases, the poignancy of old age—loneliness.

The Meals-on-Wheels service continues to deliver meals to people who are no longer able to make a meal or who, due to living alone, would not trouble to do so. This service has saved many sick people from suffering from malnutrition. One incident occurred where a doctor 'phoned requesting meals for two of his elderly patients, an unmarried brother and sister, the sister semi-senile, the brother temporarily confined to bed. A week later he phoned again stating that the couple had not received the meals and the man was in a very distressed condition as the sister was unable to cook a meal. On investigation it was discovered that the meals had been delivered and the sister had eaten both her own and her brother's meal. This matter was speedily rectified by giving one meal to the sister downstairs and taking another meal into the upstairs bedroom to the brother.

During the past year 390 persons received meals and 23,173 meals were served. The cost of each meal to the recipient is one shilling.

The Night Attendant Service is run on similar lines to the Home Help Service and is designed to help relatives and friends of invalids who cannot be left on their own with safety. During the year 45 cases were assisted and 4 night attendants were employed.

Amongst these cases were two widows both over 80 years of age, living alone, suffering from senile dementia and wandering out into the street at night. One had a married widowed daughter who helped her mother but needed some further assistance

to do so as she was on the point of a nervous collapse due to strain. The other patient had no relatives apart from a son who was married with a family and a very responsible post some considerable miles from Preston. Another woman patient of 60, single and with no relatives whatsoever, mentally ill and also wandering into the streets was assisted. All of these people were admitted to hospital within two to three weeks.

There were several cases of unmarried sons or daughters with elderly mothers or fathers who had to go to work or lose their wages and by the service of the night attendant they were able to continue to work until the parent was removed to hospital or no longer required the service.

A young man of 28 paralysed from birth was nursed by his mother until she was on the point of collapse. The father worked during the week and stayed up Saturday and Sunday nights. At the latter stages of this young man's life both parents were exhausted but wanted to keep their son at home. The night attendant was sent in to help them to do this and stayed until the young man died approximately five weeks later.

One of the saddest cases was a childless widow of 64, an inoperable cancer case, whose only relative was a sister who left her home in Manchester to nurse her dying sister. The night attendant assisted in this task for three weeks until the patient died.

The assistance of the night attendant has been given to elderly married people where one partner has been struck with sudden illness, seizures, thrombosis, heart conditions, pneumonia, accidents resulting in broken limbs and cancer, where assistance from married sons and daughters has been limited, or where there have been no children, and the strain on the partner nursing the invalid has been too great and therefore assistance was sorely needed.

The married man, with a sick wife, and needing to work to earn money to keep his family, also has received night attendance until the illness has passed the critical stage or, as in one unfortunate case, the wife died with inoperable cancer.

The value of this service can be most accurately assessed by the many vocal expressions of appreciation received from relatives and friends of the sick persons.

Table 22.
Home Help Service.

1964	Existing	New	Terminated	No. being assisted at the end of the month
January	812	41	43	810
February	810	32	34	808
March	808	23	30	801
April	801	41	42	800
May	800	37	33	804
June	804	22	24	802
July	802	17	19	800
August	800	23	21	802
September	802	40	37	805
October	805	29	30	804
November	804	26	26	804
December	804	26	24	806

IV. PREVENTION OF ILLNESS, CARE AND AFTER-CARE.

Chiropody.

The chiropody service started in May 1960 for aged persons and expectant mothers under the National Health Service Act, 1946, was continued in 1964.

During the whole of the year $8\frac{1}{4}$ clinic sessions and $2\frac{1}{2}$ domiciliary sessions were carried out by four chiropodists employed on a sessional basis.

A whole-time chiropodist was appointed in November 1964 and this helped considerably to reduce the long waiting list.

During the year 3,246 treatments were given to persons attending the clinics and 779 treatments were given to the housebound.

The number of patients receiving treatment at the end of the year was 1,002.

A very useful service is provided by the W.V.S. in carrying out clerical duties and assisting the chiropodists generally in their work.

Convalescence.

55 patients were referred for convalescence during the year, 43 women and 12 men ; but of these only 30 actually went away, 25 women and 5 men, in most cases for a period of two weeks. The remainder were either unsuitable, or wished to make their own arrangements and perhaps go away with their families. Two men preferred to return to work rather than wait two or three weeks for a vacancy.

Six of the patients this year were true convalescents, still only a small proportion of the whole, and all of them housewives. 9 were severely handicapped people who would not otherwise have been able to get away for a holiday. Their ages ranged from 37 to 74. Those who live alone enjoyed the company of the other patients and made new friends, and all appreciated having their meals prepared for them.

A senior health visitor colleague on the county staff was kind enough to find accommodation in Morecambe for a young handicapped widow, who was only able to get away while her two daughters were in camp with the guides, and the crowning joy for all of them was when she took the mother in her car on the Saturday to open day at the camp, a journey too far for the batteries of a not so young electrically propelled chair.

The remaining 50% of the patients were elderly people, who by reason of poor health would not have been able to go on holiday under normal conditions. It is a great problem to find suitable vacancies for the really frail patients, especially those who cannot cope with stairs. The majority of our handicapped patients go to the Red Cross Evelyn Devonshire Home in Buxton where there is a lift as well as excellent care and attention, but the more elderly ones find the long journey in a sitting car too tiring.

A voluntary society once again helped a patient to pay her contribution towards the cost of her convalescence, and a member of another society went over to Southport to take a patient out for a drive while she was in the convalescent home.

The number of persons sent for convalescence and the homes accommodating them are set out on the next page.

VOLUNTARY AGENCIES :

Boarbank Hall, Grange-over-Sands	...	...	...	...	1
Blackburn & District Home, St. Annes	...	...	...	...	1
B.L.E.S.M.A. Home, Blackpool	...	...	...	...	1
Evelyn Devonshire Home, Buxton	...	...	...	...	9
Greycourt Fellowship, Hest Bank	...	...	...	...	1
Lear Home of Recovery, West Kirby	...	...	...	...	4
Mary McArthur Home, Poulton-le-Fylde	...	...	...	...	1

PRIVATE HOMES :

Elmhurst, Southport	...	...	...	...	...	1
Horncliffe, Blackpool	...	...	...	...	...	10
Metropole, Morecambe	...	...	...	...	...	1

Domiciliary Meals.

Persons suffering from illness or otherwise infirm continue to be able to receive a hot mid-day meal delivered to them in their home under the domiciliary meals service.

Table 23 shows the scope of the service during 1964.

Table 23. Invalids' and Infirm Persons' Meal Service.				
Number of persons receiving meals on 1.1.64	Number of new recipients during year	Number of persons ceasing to have meals during year	Number of persons remaining at 31.12.64	Total Number of meals served during year
225	165	177	213	23,173

Laundry.

The laundry service continues to be provided from the laundry at the main civic hostel and maintains its efficient and helpful function in the domiciliary nursing care of patients.

This service is most useful for incontinent patients where there is insufficient help in the home or where facilities for washing and drying are inadequate. It is also used for the elderly disabled who are unable to make satisfactory arrangements for laundering either in their homes or through the ordinary commercial laundries.

Laundry is collected and delivered one, two or three times weekly, depending upon the necessity. 23 cases benefited from the service during 1964.

Provision of Nursing Equipment and Apparatus.

General nursing equipment and apparatus are provided by the St. John Ambulance Association which has a well stocked nursing equipment section available to everyone in the town.

This service has been supplemented directly by the Corporation in the provision of various items of equipment. The loan of these items is greatly appreciated especially where the patients are incontinent and the supply of linen available in the home is insufficient to meet the demand. The provision of these loans greatly helps the nurses to maintain a more efficient nursing service. The following equipment was loaned during the year :—

Sheets ...	...	...	...	31
Draw sheets ...	...	...	...	142
Pillow slips ...	...	...	...	22
Night Gowns ...	...	...	...	16
Night Shirts ...	...	...	...	—
Bedsteads ...	...	...	...	7
Mattresses ...	...	...	...	9
Rubber Sheets ...	...	...	...	12
Towels ...	...	...	...	9
Pillows ...	...	...	...	2
Blankets ...	...	...	...	4

Health Education.

Health education during 1964 has been primarily concerned with the consolidation of existing principles, assessing the value of the various programmes and experimenting in new fields of communication.

WINDOW DISPLAYS.

The "Window on Your Health" in Lancaster Road housed eight new displays on the following themes : (1) How to Catch a Cold, (2) Diet and the Dairy, (3) Health Department Care for the Aged, (4) The Work of Your Public Health Inspector, (5) Cancer Education, (6) The Services of Your Local Authority Clinics, Part I "The Dental Service," (7) Dangers associated with the Misuse of Fireworks, and (8) Prevention of Illness and Spread of Disease.

POSTER & LEAFLET MATERIALS.

The year represented an increasing call for printed publicity and over a dozen requests were made by members of the public, schoolteachers, food handlers etc., whose requests were met. In addition to these, 2,700 leaflets and posters were issued to health visiting staff on general health themes, 600 posters mailed to Head Teachers on Smoking and Health, and 4,500 Clean Air Bookmarks were handled by the Borough Librarian in support of the clean air cause.

ROYAL SOCIETY OF HEALTH CONFERENCE.

Convened in the Public Hall Assembly Rooms, two papers were presented to a representative audience of interested professional workers. The papers were the work of Dr. Fraser, Deputy M.O.H. Preston, and Mr. Smith, Deputy Borough Architect, the subjects being, "Child Health Yesterday, Today and Tomorrow," and "Housing Trends in the 1960's," respectively. This was an ideal situation for the mutual exchange of views by those in the forefront of health education.

SEX EDUCATION.

Much time has been spent by the Deputy Medical Officer of Health and the Health Education Officer pioneering an attempt to convey to the public a method of educating their children in the fundamentals of sex education and the following meetings have been addressed on the subject :—

(1) Ribbleton Clinic Mother's Club, (2) Saul Street Clinic Mother's Club, (3) Soroptomist's Club, (4) The Free Church Council, (5) Youth Leader's Council, (6) Students at Harris Technical College, (7) St. Margaret's Youth Club, Ingol, and (8) Open Public Meetings at The Social Centre and Greenbank Clinic.

The visual aids used were :

Films—Learning to Live, To Janet a Son, and The Innocent Party.

Filmstrip—Venereal Diseases.

Literature Handouts—Family Doctor Article The Human Miracle, Readers Digest Reprint, Once Again V.D., What Shall I tell my Child, Growing Up, and Syphilis and Gonorrhea.

OTHER FILMS.

A number of other subjects were covered with miscellaneous groups, such subjects including : Clean Air, Dental Health, Anatomy and Growth of Hair and Skin, The Birth of a Baby by Natural Delivery and Caesarian Section, Prevention of Accidents, Emergency Resuscitation, The Effects of Nuclear Weapons, Clean Food, General Hygiene, The Physiology and Treatment of Constipation, Smoking and Health, Care of the Colostomy, Resuscitation of the Newborn, and The Role of the British Midwife. The groups involved in these showing included Youth Clubs, Schools, Church Groups, Clinic Mother's Clubs, Civil Defence Personnel, and Health Department Staffs.

STAFF TRAINING.

The Health Education Officer attended a ten-day Summer School during which time he took part in the preparation of a sound filmstrip on sex education. This is to be produced commercially.

NEW MEDIA.

A photographic section has been developed for the visual publicising of health education and has already proved effective in illustrating departmental services in a number of displays.

CONCLUSION.

Unquestioned progress has been made in building good relations with the public, though much still remains to be done in orienting some sections of the public mind to healthier attitudes and ways of life. The challenge is great but encouragement comes in the form of a greater number of open doors to our message and the enthusiasm with which it is being received is heartening.

The year closed with the appointment of a new Health Education Officer the vacancy being made by the resignation of the former officer on his appointment to a new post.

Physically Handicapped.

During the year health visitors paid 967 visits to physically handicapped persons in their own home.

The scheme for the loan of aids for the handicapped has been in operation since 1955. In that year one item was issued on loan. In 1964, 65 items to the total value of £324.10.8 were issued, and at 31.12.64, 110 items of equipment were actually out on loan with a cash value of £483.17.11. It can thus be seen how the scheme has developed over the years. The range of items loaned is varied according to the needs of the patient—tripods, quadrupeds, special walk aids such as Bonaped, Westbury, Alesbury and Metcalfe Sledge, Zimmerlift, special type hospital beds, mechanised seat units, extended lavatory seats and helping hands. The patients retain the aids for as long as they are required and in some instances this is long term.

Cerebral Palsy.

Cerebral Palsy varies greatly in severity from one to another, and many of the less afflicted cases are able to carry on their activity without help or supervision. Some of the more severe adult cases who are disabled and who may need help in various ways are registered in the welfare services section and many of the children affected are known to the school health service.

The cases known to the staff are recorded in the following table.

Table 24. No. of known cases of cerebral palsy and epilepsy.						
Ages	Cerebral palsy			Epilepsy		
	Males	Females	Total	Males	Females	Total
—5	1	1	2	—	—	—
5+	9	5	14	1	—	1
10+	10	6	16	7	12	19
15+	8	5	13	6	16	22
20+	11	6	17	15	7	22
30+	10	5	15	4	9	13
40+	1	1	2	1	10	11
50+	2	—	2	3	6	9
60+	2	1	3	2	3	5
70+	—	—	—	—	1	1
80+	—	—	—	—	1	1
Total ...	54	30	84	39	65	104

There were 54 males and 30 females registered as having cerebral palsy at the 31st December, 1964. Thirteen children attended the open-air school and five attended special schools.

Two men and two women were attending the Handicapped Persons Centre at the close of the year.

Fifteen men and four women were employed in open industry and two men were in sheltered employment.

Epilepsy.

At the 31st December, 1964, there were 39 males and 65 females registered as epileptics.

Six children attended the open-air school and three attended special schools and 5 come within the province of the Mental Health Act.

Two men were in epileptic colonies, and six were in psychiatric units.

Eight women were in epileptic colonies and three were in psychiatric units.

Twelve men and ten women were employed in open industry. One man was attending a Ministry of Labour rehabilitation course.

Problem Families.

The pattern in relation to the work has followed on much the same lines as in previous years and the problems have shown little variation. Undoubtedly those families which are brought before the Co-ordinating Committee represent in almost all cases the "hard core" in which, with continued support, little improvement is shown, but further deterioration in standards may be prevented.

Possibly the greatest problem presented and the one with which it is most difficult to deal is that of sub-normal intelligence of one or both parents. Other significant factors are an unstable background, drunkenness and the inability to face up to responsibilities.

There were 22 families under consideration at the beginning of the year. Seven families were removed from review during the year and 8 were referred for less frequent review—that is 3 monthly or 6 monthly. Twenty-four new cases were added leaving a total of 39 cases under review at the end of the year.

Tuberculosis.

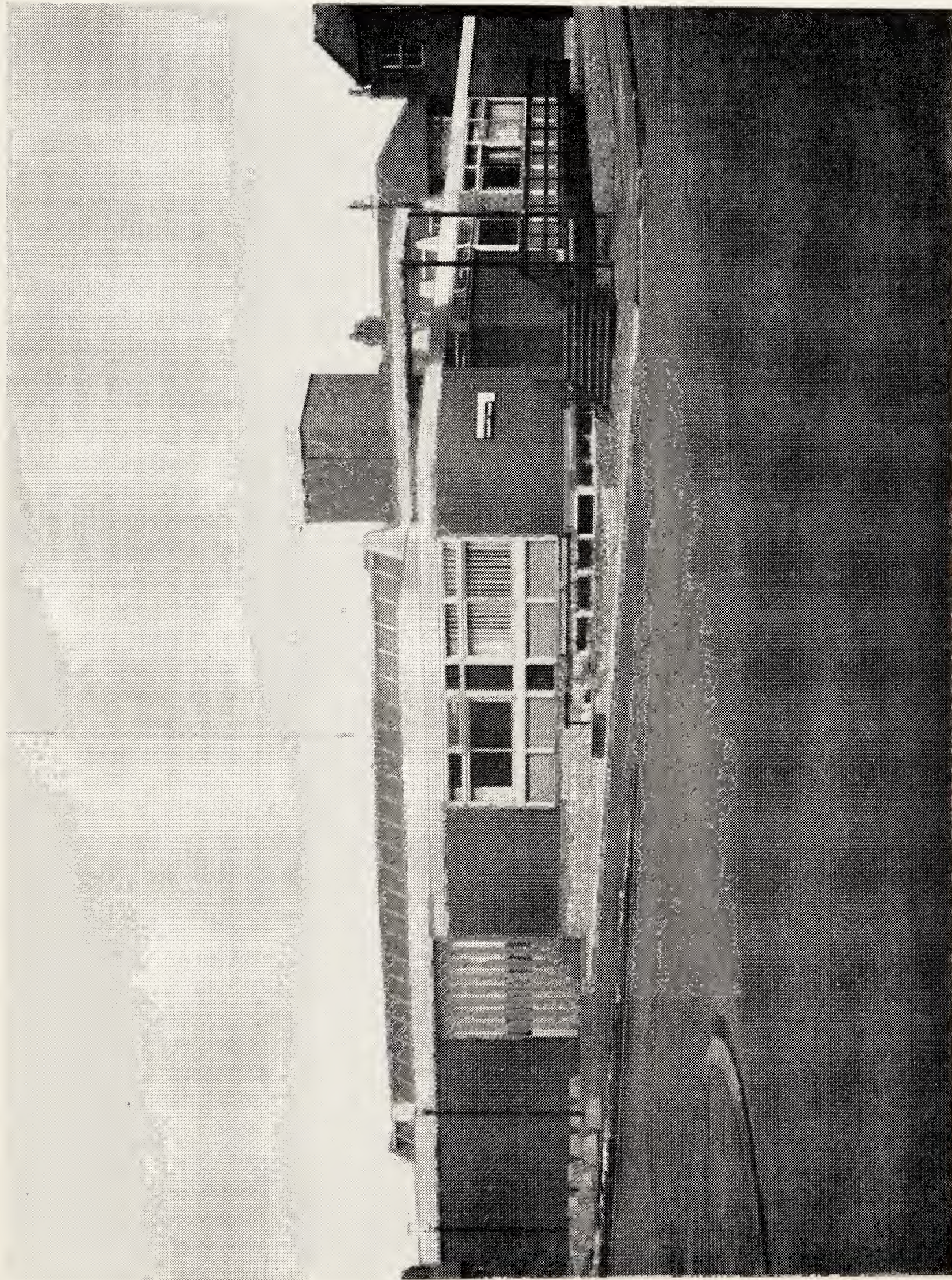
The general arrangements for prevention, care, and after-care in relation to tuberculosis are given on page 76, et. seq.

V. AMBULANCE SERVICE.

The Service took possession of a new purpose-built station on 19th December. This replaced the unsuitable and sub-standard premises which had formed part of the now demolished Transport Depot, and the more recent temporary quarters in the old Fire Station.

The capital cost of the new station was £62,000. It is well situated in Deepdale Road being adjacent to the Royal Infirmary and within easy reach of Sharoe Green Hospital. Facilities include a duty-room for the men with provision for cooking, recreation, dining-room space, showers and separate locker accommodation. The control room has a single panel and one telephone with a miniature switchboard replacing the previous battery of individual sets. The latest radio telephone equipment enables this to be linked up with the direct lines to the two hospitals. As a result a driver attendant can now speak directly to a doctor in the hospital and obtain advice. This link-up would also be of outstanding value in the case of a major accident.

The garage itself has accommodation for 21 vehicles, is heated, and has easily controlled folding doors. Facilities include an inspection chamber, automatic vehicle wash, store rooms, and a wash room for vehicle equipment.



HEALTH DEPARTMENT TRANSPORT GARAGE, DISINFECTING STATION AND AMBULANCE STATION

Built in conjunction with the Ambulance Station, and sharing the garage accommodation, are the transport section and meals-on-wheels service. Other facilities available are storage and workshop space for staff engaged on maintenance of public conveniences, and on disinfestation, including a large autoclave.

Vehicles.

The vehicle strength remained the same at six ambulances and four sitting-case cars. It is planned early in the new year to replace one of the older sitting-case cars with two larger type sitting vehicles designed to carry 10 patients.

Staff.

The staff establishment was increased by two driver-attendants as from the 1st October. The establishment is now, Station Officer, 3 telephonists and 28 driver attendants.

Operational Services during the year.

The total mileage run by the service increased by 11,404 miles over that in 1963, to a total of 172,916 miles in 1964. The number of patients transported increased to 62,504, compared with 55,331 in 1963.

Local authority work takes an increasing amount of the ambulance service time, having transported some 18,068 persons and travelled 25,022 miles during the year. This work includes the transport of children to the Junior Training centre and trainees to the Adult Training Centre. 358 elderly people were taken to clinics for chiropody treatment.

The following tables give details of the monthly mileage patient transportation and the total mileage and journeys covered since 1950 :—

Table 25						
Month	Total Work Load			Local Authority Work		Total Journeys
	Patients Carried		Mileage	Patients	Mileage	
	Stretcher	Sitting Cases				
January ..	917	4,415	13,671	1,780	2,489	1,520
February ..	828	4,049	14,087	1,592	2,220	1,361
March ..	845	4,203	14,084	1,608	2,373	1,460
April ..	973	3,986	13,884	1,249	1,811	1,432
May ..	952	4,120	13,790	1,466	1,933	1,466
June ..	915	4,815	15,741	2,023	2,736	1,633
July ..	919	3,739	14,375	1,072	1,540	1,461
August ..	926	3,297	12,573	732	1,076	1,386
September ..	972	4,575	15,323	1,817	2,517	1,549
October ..	940	4,841	15,759	1,574	2,213	1,552
November ..	860	5,028	15,035	1,876	2,350	1,570
December ..	938	4,451	14,594	1,279	1,764	1,579
Total ..	10,985	51,519	172,916	18,068	25,022	17,969

Table 26.

Ambulance Service—Record of journeys made and mileage covered.

BOROUGH															
	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
January Mileage Journeys	7,661 1,622	8,944 1,922	8,620 1,970	10,327 2,365	11,029 2,791	12,535 3,198	12,376 3,015	11,520 2,953	10,737 2,921	12,210 3,452	11,867 1,393	11,785 1,347	12,280 1,421	13,364 1,452	13,671 1,520
February Mileage Journeys	6,848 1,603	7,898 1,719	9,065 1,910	9,188 2,283	10,349 2,688	10,688 2,743	11,763 2,831	10,767 2,724	10,541 2,694	11,466 2,900	12,835 1,429	11,018 1,364	11,360 1,243	12,452 1,272	14,087 1,361
March Mileage Journeys	8,095 1,904	8,484 1,899	8,820 1,811	9,994 2,492	11,092 2,697	11,925 2,928	12,149 3,035	10,568 2,978	11,040 2,812	11,381 2,109	13,090 1,546	12,591 1,425	10,631 1,194	12,955 1,311	14,084 1,460
April Mileage Journeys	7,627 1,638	9,359 1,958	8,614 1,605	9,342 2,293	10,272 2,474	11,110 2,619	11,138 2,811	10,812 2,803	10,498 2,581	10,670 1,420	11,813 1,291	10,091 1,257	10,433 1,200	12,537 1,233	13,884 1,432
May Mileage Journeys	7,686 1,791	8,297 1,887	9,007 1,856	9,341 2,337	11,087 2,932	11,807 2,805	10,640 2,734	11,903 2,948	10,692 2,689	11,883 1,457	12,768 1,513	12,839 1,439	12,609 1,350	13,897 1,391	13,790 1,466
June Mileage Journeys	8,061 1,731	9,060 1,946	9,171 1,802	10,048 2,543	11,486 2,757	11,403 2,923	10,320 2,717	11,004 2,643	11,854 2,891	13,282 1,470	12,720 1,505	13,306 1,489	12,086 1,362	12,558 1,249	15,741 1,633
July Mileage Journeys	8,461 1,958	8,988 1,774	9,598 1,819	9,717 2,438	11,792 2,581	11,987 2,589	10,975 2,433	11,576 2,755	11,280 2,702	11,878 1,461	11,734 1,337	12,406 1,315	12,020 1,382	13,925 1,290	14,375 1,461
August Mileage Journeys	7,765 1,676	9,157 1,625	9,250 1,836	10,325 2,431	11,627 2,789	12,114 2,760	11,103 2,683	10,487 2,534	11,333 2,691	11,396 1,327	11,505 1,437	12,881 1,416	10,564 1,252	12,959 1,306	12,573 1,386
September Mileage Journeys	7,994 1,498	9,394 1,654	8,764 1,854	10,375 2,471	11,080 2,787	12,440 2,852	10,351 2,679	11,516 2,787	11,978 3,104	13,147 1,529	12,122 1,472	13,569 1,420	12,243 1,336	14,717 1,438	15,323 1,549
October Mileage Journeys	8,917 1,615	9,059 1,796	10,129 2,323	11,165 2,687	11,471 2,574	11,576 2,704	12,269 3,195	11,420 2,675	12,165 3,219	12,565 1,378	12,583 1,469	13,072 1,450	12,225 1,399	15,685 1,587	15,759 1,552
November Mileage Journeys	8,427 1,877	7,659 1,784	9,401 2,367	10,873 2,738	13,153 2,963	10,442 2,661	12,603 2,986	11,012 2,775	10,455 2,707	12,260 1,377	12,766 1,408	13,706 1,457	15,022 1,603	13,699 1,409	15,035 1,570
December Mileage Journeys	8,401 1,781	8,561 1,914	9,751 2,630	10,957 2,714	12,460 3,165	10,914 2,738	11,253 2,698	10,216 2,704	10,555 2,803	12,450 1,376	11,507 1,395	10,766 1,388	10,888 1,281	12,864 1,410	14,594 1,579
Total Mileage Journeys	95,943 20,694	104,860 21,948	110,190 23,783	121,652 29,792	136,898 33,198	138,941 33,520	136,940 33,817	132,801 33,279	133,128 33,814	144,588 21,256	147,310 17,195	148,030 16,767	142,361 16,023	161,512 16,353	172,916 17,969

VI. DOMICILIARY, MEDICAL, PHARMACEUTICAL, DENTAL AND OPHTHALMIC SERVICES.

I am indebted to Mr. Webster, Clerk to the Preston Executive Council, for the following statement on the medical, pharmaceutical, dental and ophthalmic services administered by the Preston Executive Council :—

General Medical Services.

The number of patients registered on doctors' lists at 1st April, 1965, was 113,780. Medical Services were provided by 74 practitioners, 57 of whom were resident in the Borough, and 68 of whom were also included in the Council's Obstetric List for the provision of Maternity Medical Services.

The total gross payment for General Medical Services for the year was £193,807.8.2 including £8,297.10.5 for Maternity Medical Services.

Pharmaceutical Services.

On the 1st April, 1965, there were 44 chemists' establishments on the Council's Pharmaceutical List for the supply of medicines and appliances, and 10 contractors for the supply of appliances only. The Council's Rota Service Scheme providing for establishments in different parts of the town to be open for one hour each evening after the normal hour of closing, and one hour each Sunday, Local and Bank Holiday, continued to operate satisfactorily throughout the year.

During the year 25 test prescriptions were taken, 24 of which were satisfactorily dispensed.

Payments made by the Council for the supply of medicines and appliances amounted to £281,712.18.3 including £1,360.10.0 for Rota Services.

Charges paid by patients towards this part of the Service amounted to £69,921.6.9. 684,080 prescriptions were dispensed by Chemists during the year.

General Dental Services.

At 1st April, 1965, there were 30 Dental Practitioners on the Council's Dental List. The total cost to the Council for the supply of dental appliances, extractions and conservative treatment was £167,371.11.6. The charges paid by patients towards such treatment amounted to £43,475.7.11.

Supplementary Ophthalmic Services.

At the 1st April, 1965, there were 3 Ophthalmic Medical Practitioners ; 20 firms of Ophthalmic Opticians and 1 firm of Dispensing Opticians on the Council's Ophthalmic List. 24,767 applications for glasses were received during the year, as compared with 24,187 the previous year. Of the number of sight tests provided 19,322 cases were supplied with glasses under the Health Service. Applications for replacement or repair of glasses totalled 974 of which 757 were approved.

The total cost to the Council for this branch of the Service was :—

	£	s.	d.	£	s.	d.
Sight Testing				20,506	11	4
Supply and Repair of Glasses	52,437	11	5			
Less paid by Patient	31,251	9	7			
				21,186	1	10
				£41,692	13	2

Mental Health

Work commenced on a purpose built hostel for eight persons on the Brookfield Housing Estate and it is anticipated that it will be completed in the summer of 1965.

The planning of the extension of the Adult Training Centre to accommodate twenty more men and thirty women was approved and it is hoped that building will commence in 1965.

Administration.

The mental welfare officers number four, as in previous years.

At the Junior Training Centre, Mrs. Hall was appointed as an assistant supervisor in September, 1964, to replace Miss Charnley, who resigned in August, 1964. Miss J. Harrison successfully completed the course of the National Association for Mental Health and obtained the Diploma of Teachers of the Mentally Handicapped and resumed duty in July, 1964. Miss P. Ragan, trainee assistant supervisor, commenced her studies at the Manchester course of the National Association for Mental Health for Teachers of the Mentally Handicapped, in September, 1964.

At the Adult Training Centre, Mr. Wright, instructor, resigned to take up another senior appointment in August and Mr. Kelly was appointed to fill that position in September.

In the autumn, the four mental welfare officers attended a course of ten evening lectures at the Harris College on "Special Problems of Social Welfare." In November, Mr. A. Morris, mental welfare officer, commenced a course of four three-day sessions, held monthly, at Harrogate on "Case Work Studies" organised by the National Association for Mental Health.

On September 25th, 1964, Mrs. Broadbent, mental welfare officer, gave a lecture to senior nurses at Whittingham Hospital on "Community Care for the Mentally Ill."

The mental welfare officers co-operated in the survey into "Problem Families" at present being undertaken in Preston.

Account of Work Undertaken in the Community. Mental Health Act, 1959.

Number of persons admitted to hospital between 1st January and 31st December, 1964 :—

				<i>Males</i>	<i>Females</i>
Section 5 (Informal)	...	...	...	96	150
Section 25 (Observation)	...	...	...	36	61
Section 26 (Treatment)	...	...	...	11	6
Section 29 (Emergency)	...	...	...	4	6
				<hr/> 147	<hr/> 223

Of the 107 cases admitted to hospital under Sections 25 and 29, four males were subsequently detained under Section 26 (Treatment), also twenty males and thirty-three females remained in hospital as informal patients, Section 5.

At the request of the medical directors of psychiatric hospitals, 73 visits were made and reports given on home conditions and family histories.

During the year 128 males and 171 females discharged from hospital were supervised by the mental health staff by arrangements with general practitioners and the patients; a further 171 males and 267 females were visited at the request of psychiatrists or general practitioners, or other agencies, 2,792 visits being made for this purpose. Altogether, 1,145 office interviews took place with patients and relatives in connection with mental illness.

The mental health staff attended out-patient clinics held at Sharoe Green Hospital for case conferences and discussions with the psychiatrists. Visits were made to Whittingham Hospital and the Psychiatric Unit, Sharoe Green Hospital for consultation with the responsible medical officers concerning the after-care required in individual cases.

A member of the mental health staff assisted in the organisation of the social evenings held at the Psychiatric Unit, Sharoe Green Hospital, every Wednesday night from 7.0 p.m. to 9.0 p.m.

During the year 16 student nurses from Whittingham Hospital made day visits to observe the specialised welfare work done in the community. Also seven student health visitors attended for visits of observation for periods varying from one to five days. A student from the new course for Teachers of the Mentally Handicapped held at the Harris College came to the section for a day.

Personal Help Service.

This service has continued through the year and leaflets have been displayed at the Citizens Advice Bureau and in the various clinics. Anyone with worries or troubles is invited to come along to the Saul Street office on Thursday afternoon and discuss them with one of the mental welfare officers. During the year nine interviews have taken place. The disposal of the cases seen was as follows:—

Advice given at interview	...	...	...	...	...	4
Referred to N.S.P.C.C.	...	...	...	...	...	1
Referred to Welfare Section	...	...	...	...	...	2
Referred to Housing Department	...	...	...	...	...	2
						<hr/> 9 <hr/>

Attendance at Social Centre.

The Friday afternoon session for persons suffering from mental illness has been continued throughout the year at the Social Centre, Deepdale Road.

Occupational therapy, games, dancing and music are available and patients are encouraged to take part in all activities. Patients have also attended the centre on Mondays and Thursdays, together with physically handicapped persons, and have attended concerts and dances held at regular intervals during the winter and the Christmas party for handicapped persons.

An occupational therapist and members of the mental health staff attend the Social Centre every Friday afternoon. Transport is provided to and from the centre in some cases.

During the year 59 patients have attended the centre with an average attendance of fourteen patients per session.

From Saturday, 12th September to Thursday, 17th September, an exhibition was held at the Social Centre in conjunction with the blind and handicapped persons section. Articles made at the Social Centre and at the Adult Training Centre were on display. The exhibition was well attended and members of the staff were available to answer questions and to take orders for goods on display.

Subnormal and Severely Subnormal Persons.

During the year new cases to the number of six males and five females were reported.

The number of subnormal and severely subnormal persons on the authority's register on 31.12.1964 was 542 as follows:—

				<i>Males</i>	<i>Females</i>
Care of the local authority	...	...		191	168
In hospital	...	...	...	106	77
				<hr/> 297	<hr/> 245

Domiciliary Care.

During the year 756 home visits were made by the mental health staff and 270 office interviews took place in relation to subnormal and severely subnormal persons. Eleven investigations regarding home and social conditions were made at the request of medical directors of psychiatric hospitals.

Temporary hospital care was arranged for twenty-four subnormal and severely subnormal persons, to enable their parents to have a holiday or on account of sickness in the family.

Admissions to hospital.

During the year seven males and two females were admitted to hospital as Informal patients, Section 5 of the Mental Health Act, 1959.

The Creche.

The Creche at 2 North Road, continues to provide a welcome rest on two afternoons each week for mothers of children who are unsuitable for the junior training centre, but the number attending has been reduced considerably since the nursery wing at the Junior Training Centre was opened to cater for children at a younger age.

The Creche is open on Tuesday and Thursday afternoons each week between the hours of 1.30 p.m. and 4.30 p.m., transport being provided to and from the Creche by the ambulance service. An average of three children have attended per session.

Members of the Preston Branch of the National Society for Mentally Handicapped Children staff the Creche voluntarily. The mental health staff visit the Creche regularly and on consultation with the honorary secretary of the society decide on the suitability of the children for admission.

The arrangement by which suitable children known to the Society from No. 4 Health Division of the Lancashire County Council can attend was continued and two such children attended during 1964.

The parents of the children have expressed their appreciation of the service provided and of the benefit they derive from having two free afternoons per week.

Youth Club.

The youth club for mentally handicapped children continued throughout the year, each Friday night between the hours of 7 p.m. and 9 p.m. at the Social Centre, Deepdale Road.

The premises are provided by this authority and the Preston branch of the National Society for Mentally Handicapped Children provide the equipment and staff the youth club. Games, dancing, woodwork and painting of articles made is provided for, and a party or concert is arranged once per month during the winter.

There are 95 members on the register and the average attendance is 50 per session.

A member of the mental health staff attends the youth club to give advice when necessary.

In connection with the Youth Club at 2 North Road, in premises provided by this authority, a domestic science centre for senior girls was opened in November. Each Wednesday evening, between 7 p.m. and 9 p.m., twelve girls are being taught cookery, laundering, ironing and general housewifery. Instruction is given by voluntary helpers of the Society.

Junior Training Centre.

The scope of the centre has increased by admitting subnormal children at an early age into the nursery wing, 16 children being in this unit.

A mixed group of senior boys and girls have attended the weekly swimming sessions during the summer months at Saul Street Baths. Two girls and two boys obtained the preliminary swimming certificate during this period.

Two senior boys attended morning sessions at the Adult Training Centre before transferring full-time at 16 years of age.

In April a party of 22 boys, accompanied by 3 staff, spent an enjoyable week's holiday at a Christian Endeavour Holiday Home at Penmaenmawr, North Wales.

On Saturday, 31st October, a large number of parents and friends and members of the Health Committee attended the "Open Day." A programme of music and dancing was given by the senior pupils and colour slides of the annual sports day and the holiday at Penmaenmawr were shown.

The annual Christmas party was held on 17th December and was attended by the Mayor and Mayoress and members of the Health Committee.

During the year the centre was visited by the tutor, twelve nursery nurse students, and a further number of student health visitors. Later in the year a group of fourteen nursery nurse students visited the centre.

In November a high grade subnormal woman, who had been in hospital, was admitted to the centre for a trial period, as a voluntary help in the nursery wing.

Table 27 sets out the number of pupils under instruction at the centre during the year.

Table 27.
Pupils in attendance at the Training Centre during 1964.

	Number of cases under instruction on 1.1.64		Number of new cases admitted during the year		Number Discharged		Number on Register on 31.12.1964	
	Under 16 yrs.	Over 16 yrs.	Under 16 yrs.	Over 16 yrs.	Under 16 yrs.	Over 16 yrs.	Under 16 yrs.	Over 16 yrs.
	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.
County Borough	21 10	— 6	8 2	— —	1 —	2 —	25 10	1 8
County Council	7 8	— 6	4 2	— —	— —	— 1	9 10	2 5
	28 18	— 12	12 4	— —	1 —	2 1	34 20	3 13

Adult Training Centre.

The work at the centre during the second year has continued with good results, both in the type and quality of the articles produced and in the training given to individuals.

During the year 40 teenagers and men have been on the register and 26 were in attendance at the end of the year.

In collaboration with the Disablement Resettlement Officers of the Ministry of Labour, 6 men were placed in employment in open industry.

Two teenagers were initially transferred from the Junior Training Centre for mornings only. This made the change over less disturbing to the individual and both settled well in a new environment.

Suitable persons with other forms of handicap continue to attend the centre.

Where necessary, transport is available to convey the workers to and from the centre and a mid-day meal, supplied by the Civic Hostel, is served daily.

Work has followed along three main lines, woodwork, concrete mixing and wire work.

A variety of work is being done for the Corporation departments including the making of seed boxes and stool frames, as well as the renewal of defective tubular chairs. Small orders have also been completed for the public purchase of garden seats, tables, clothes props and stool frames.

Wire work consists mainly in the making of chain link fencing and wall ties for building and for coat hangers, for all of which there is a constant demand.

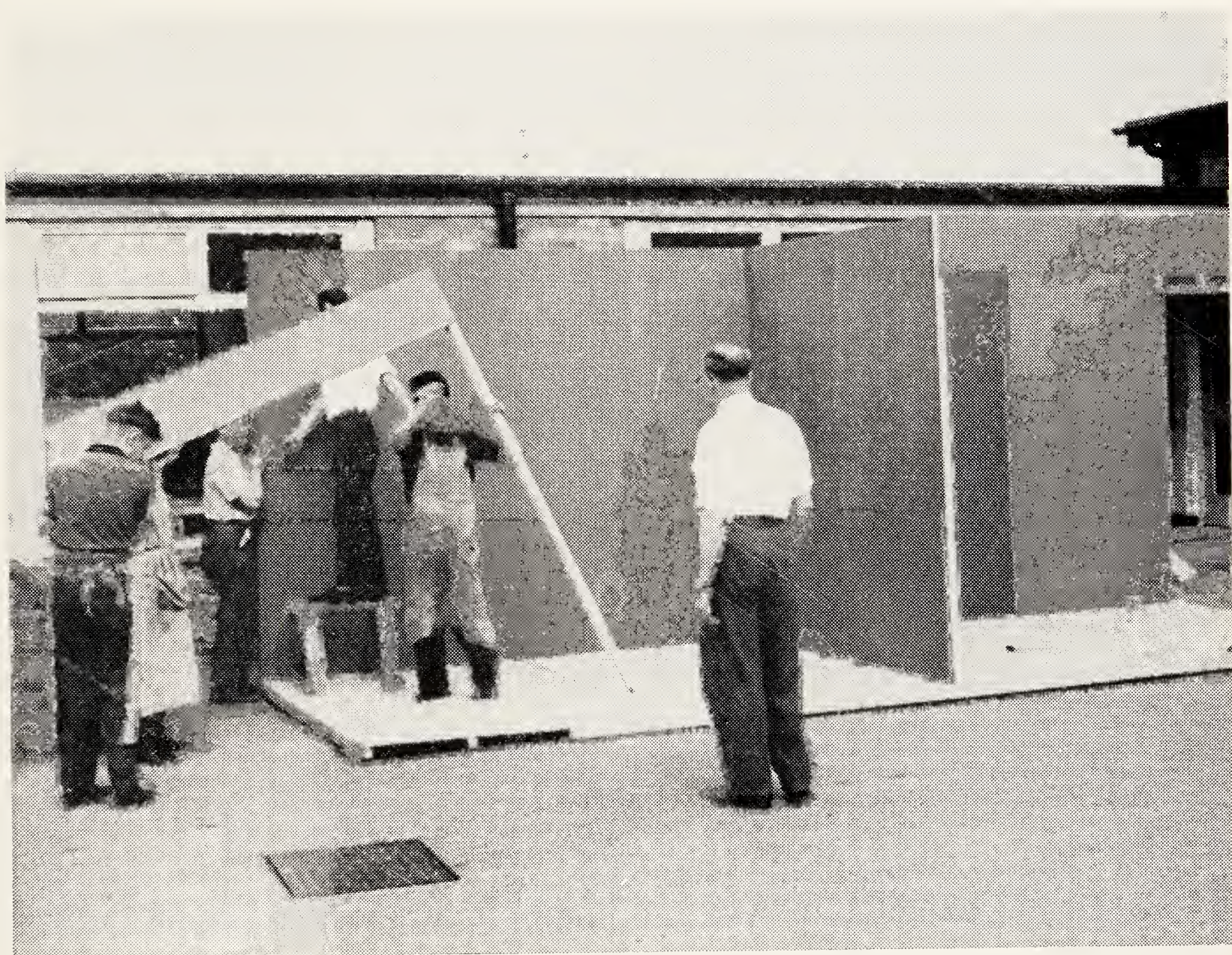
Concrete work in the form of wall blocks, flags and path edgings has been in steady demand throughout the year.

Contract work, assembling plastic toys, provided a steady source of employment, especially in the summer and early autumn, and simple chair upholstery was commenced and proved to be successful and the work continued to be provided.

The exhibition held in September, in conjunction with the Handicapped Persons Centre, proved very successful and the general public placed orders for a variety of goods that kept the workers fully employed for a considerable period.

During the year a number of student health visitors visited the Centre.

The Royal Society of Health held a conference in Preston on the 25th June and the centre was one of the places of interest visited by a number of the delegates.



MAKING AN EXHIBITION STAND

Prevalence and Control of Infectious Disease

Measles is the only common notifiable infectious disease that appears to be epidemiologically unaffected by the modern way of life and the two-year periodic epidemic occurred in 1964 and was about the expected magnitude numerically. It continued into 1965, but was diminishing rapidly in the early weeks of that year.

A modified epidemic of whooping cough occurred in the north west area during 1964 starting apparently on Merseyside during 1963. Preston became involved early in 1964. A total of 100 cases occurred of which three-quarters were notified in the first six months of the year.

Otherwise infectious disease was on the decline and cases of the simpler infections occurred only sporadically.

More detailed information about certain individual diseases and preventive measures taken against them including immunisation appear in the subsequent pages.

Table 28 gives the annual notifications over the past ten years.

Table 28
Number of notifications grouped according to year and disease.

DISEASE	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
Smallpox	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	152	170	59	236	319	101	54	36	46	56
Measles	759	1220	1142	828	1503	777	802	1698	312	1548
Whooping Cough	17	274	106	7	18	118	23	22	20	100
Pneumonia (Primary and Influenzal)	53	50	64	50	92	52	56	32	27	17
Acute Encephalitis	—	1	—	—	4	—	1	1	—	—
Acute Poliomyelitis	11	4	3	16	—	—	4	—	—	—
Meningococcal infection	1	1	8	3	1	5	1	2	—	—
Typhoid Fever... ..	1	—	—	—	—	—	—	—	—	—
Paratyphoid Fever	1	2	—	—	1	—	—	1	—	—
Dysentery	189	351	79	71	336	651	131	258	73	23
Food Poisoning	51	36	24	21	31	51	13	14	16	9
Erysipelas	7	10	6	3	7	7	6	4	2	4
Tuberculosis, Pulmonary	61	60	49	43	48	39	49	45	48	46
Tuberculosis, Non-Pulmonary	13	10	11	8	3	4	7	5	6	9
Puerperal Pyrexia	43	50	39	39	32	44	37	35	28	19
Ophthalmia Neonatorum	5	5	8	4	8	4	2	3	—	1
Malaria	1	—	—	—	—	2	—	—	1	—
Infective Hepatitis	—	22*	18	59	262	168	58	35	44	34

* From 17.9.56 when the disease was made notifiable.

Table 29 gives the cases notified during the present year arranged according to disease and age at notification.

Table 29. Notifiable Infectious Diseases (excluding Tuberculosis) occurring during the year, showing age grouping, degree of hospitalisation and mortality.																
DISEASE	CASES NOTIFIED													TOTAL	Cases admitted to hospital	DEATHS
	Under 1	1—	2—	3—	4—	5—	10—	15—	25—	35—	45—	65 and over	Age unknown			
Scarlet Fever	1	2	1	5	8	33	5	1	—	—	—	—	—	56	4	—
Measles	62	195	261	236	264	516	7	6	1	—	—	—	—	1548	31	—
Whooping Cough	21	10	16	11	9	29	3	1	—	—	—	—	—	100	9	—
Acute Pneumonia (Primary and Influenzal)	1	—	—	—	—	—	—	—	1	2	4	9	—	17	—	58
Puerperal Pyrexia	—	—	—	—	—	—	—	7	9	2	—	—	1	19	17	—
Erysipelas	—	—	—	—	—	—	—	—	1	—	2	1	—	4	—	—
Dysentery	2	4	5	1	—	1	—	3	—	4	3	—	—	23	5	—
Acute Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infection	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Anterior Poliomyelitis and Polioencephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	1	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—
Food Poisoning	1	1	—	—	—	2	—	1	1	—	1	1	—	8	—	—
Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Infective Hepatitis	—	—	—	—	1	7	7	7	3	—	7	2	—	34	—	—
	89	212	283	253	282	588	22	26	16	8	17	13	1	1810	67	58

Smallpox.

No case occurred in either the town or the port during the year.

The number of primary vaccinations of infants showed an increase over 1963, there being 376 in 1964 compared with 219 the previous year. The main reason for this was that during 1963 most general practitioners raised their timing for this procedure from 3 months to between one and two years of age. As a result there was a period in 1963 when few vaccinations were being carried out.

The total number of infants under the age of two years vaccinated by general practitioners in 1964 is equivalent to 15.5% of the live births during 1964.

Table 30.
Vaccination against Smallpox.

	0—3 Months	3—6 Months	6—9 Months	9—12 Months	1—2 Years	2—4 Years	5—14 Years	15+ Years	Total
Number Vaccinated	7	17	14	11	284	28	7	8	376
Number Re-Vaccinated						2	1	7	10
	7	17	14	11	284	30	8	15	386

Table 31.
DIPHTHERIA IMMUNISATION INDEX
31st December, 1964.

Age on 31.12.64 (i.e., born in year)	Under 1 1964	1—4 1960-1963	5—9 1955-1959	10—14 1950-1954	Under 15 Total
A. Number of children whose last course was completed in the period 1960-64.	427	5,466	5,704	4,662	16,259
B. Number of children whose last course was completed in the period 1959 or earlier.	—	—	1,668	3,710	5,378
C. Estimated mid-year child population.	2,000	7,500	15,600		25,100
Immunity Index 100 A/C.	21.35	72.88	66.45		64.78

Table 32.
Number of children receiving a full primary course of diphtheria immunisation

	Annual Births	YEAR OF BIRTH														Total	
		1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963		1964
		2101	1962	1960	1914	1823	1832	1843	1933	1864	1964	2023	2037	2210	2070		2152
YEAR DIPHTHERIA IMMUNISATION COMPLETED	1950	83															83
	1951	893	116														1009
	1952	168	834	99													1101
	1953	57	150	692	122												1021
	1954	64	86	225	929	178											1482
	1955	84	40	77	179	824	199										1403
	1956	118	83	40	53	116	818	211									1439
	1957	13	71	57	27	45	113	796	195								1317
	1958	8	14	110	101	58	79	139	900	199							1608
	1959	8	5	18	79	87	28	48	121	688	192						1274
	1960	7	7	16	23	108	62	40	56	186	877	228					1610
	1961	109	8	11	22	24	102	77	58	94	229	979	186				1899
1962	30	94	10	3	11	15	106	88	28	33	147	807	165			1537	
1963	1	6	138	3	3	6	19	94	102	32	66	240	1160	408		2278	
1964		3	4	128	4	1	7	12	107	110	30	68	137	1003	433	2047	
Total	1643	1517	1497	1669	1458	1423	1443	1524	1404	1473	1450	1301	1462	1411	433	21108	

Diphtheria.

No case of diphtheria has occurred in Preston since 1951.

Immunisation is routinely offered to parents for their children at 6 months, 5 years and 10 years of age, and this has been the practice in Preston for many years. Therefore it is of interest that many parents should not accept this form of protection until the second or third opportunity. During the year 217 children received a primary course at 5 years of age, and a further 128 children at 10 years.

Tetanus.

Although tetanus immunisation cannot yet be said to have acquired the traditional standing of other forms of immunisation it is well accepted by parents. Pre-school children receive it routinely in the triple vaccine, but most schoolchildren, having been previously immunised against diphtheria and pertussis, require to be given a separate course of injections. Nevertheless, over 50% of the school population will have been immunised by the end of 1965, although this procedure was first made available in 1961.

The numbers of children immunised are shown in Table 33.

Table 33
Tetanus Immunisation

	Year of Birth																Total	
	Year	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	School	Pre-School
Children who received primary tetanus immunisation.	1961	252	7	2	7	6	38	182	19	40	80	590	183	—	—	—	489	918
	1962	95	747	9	12	34	44	464	247	24	26	131	681	111	—	—	1652	973
	1963	15	41	1024	14	12	20	52	504	430	42	71	248	1175	407	—	2091	1964
	1964	1	4	32	996	9	4	17	27	448	516	31	68	137	1003	433	2046	1681
Children who received re-inforcing injections.	1961	5	1	—	2	2	9	32	6	—	1	2	—	—	—	—	49	11
	1962	—	1	5	—	—	5	40	35	—	3	2	2	—	—	—	86	7
	1963	6	200	316	6	12	21	82	444	64	21	33	169	200	—	—	1156	418
	1964	—	16	687	297	4	13	34	199	605	108	36	143	656	551	2	1956	1395

Measles.

There were 1,548 notified cases of measles during the year, with no deaths. Thirty-one cases were admitted to hospital but this is not necessarily an indication of severity of attack because unsuitable home conditions are a significant factor.

The epidemic commenced late in June and continued throughout the remainder of the year. The age distribution was typical with two-thirds of the cases being below school age.

Whooping Cough.

The incidence of whooping cough has recently been low in the north west and the first sign of a new wave of infection was evidenced in rising notifications in Liverpool early in 1963. The disease spread through Merseyside and increased incidence began to occur in south east Lancashire in the second half of 1963. The wave of infection reached Preston about the beginning of 1964 and 76 cases occurred in the first half of that year. A total of 100 cases occurred in 1964 and the disease once more has spent itself after the smallest epidemic incident in the local history of the disease.

67 cases were under the age of 5 years and 15 of these had earlier been immunised. 33 cases over 5 years occurred of whom 9 had been immunised.

The pertussis organism was recovered by pernasal swab from four unimmunised cases. No immunised case yielded a positive swab.

Immunisation continued unabated and at the end of the year 65% of the under 5 population was known to be immunised. Booster doses continue to be given to children at school entry.

Table 34.
WHOOPING COUGH IMMUNISATION INDEX
31st December, 1964.

Age on 31.12.64 (i.e., born in year)	Under 1 1964	1—4 1960-1963	5—9 1955-1959	10—14 1950-1954	Under 15 Total
A. Number of children whose last course was completed in the period 1960-64.	423	5,446	5,425	960	12,254
B. Number of children whose last course was completed in the period 1959 or earlier.	—	—	1,668	4,286	5,954
C. Estimated mid-year child population.	2,000	7,500	15,600		25,100
Immunity Index 100 A/C.	21.15	72.61	40.93		48.82

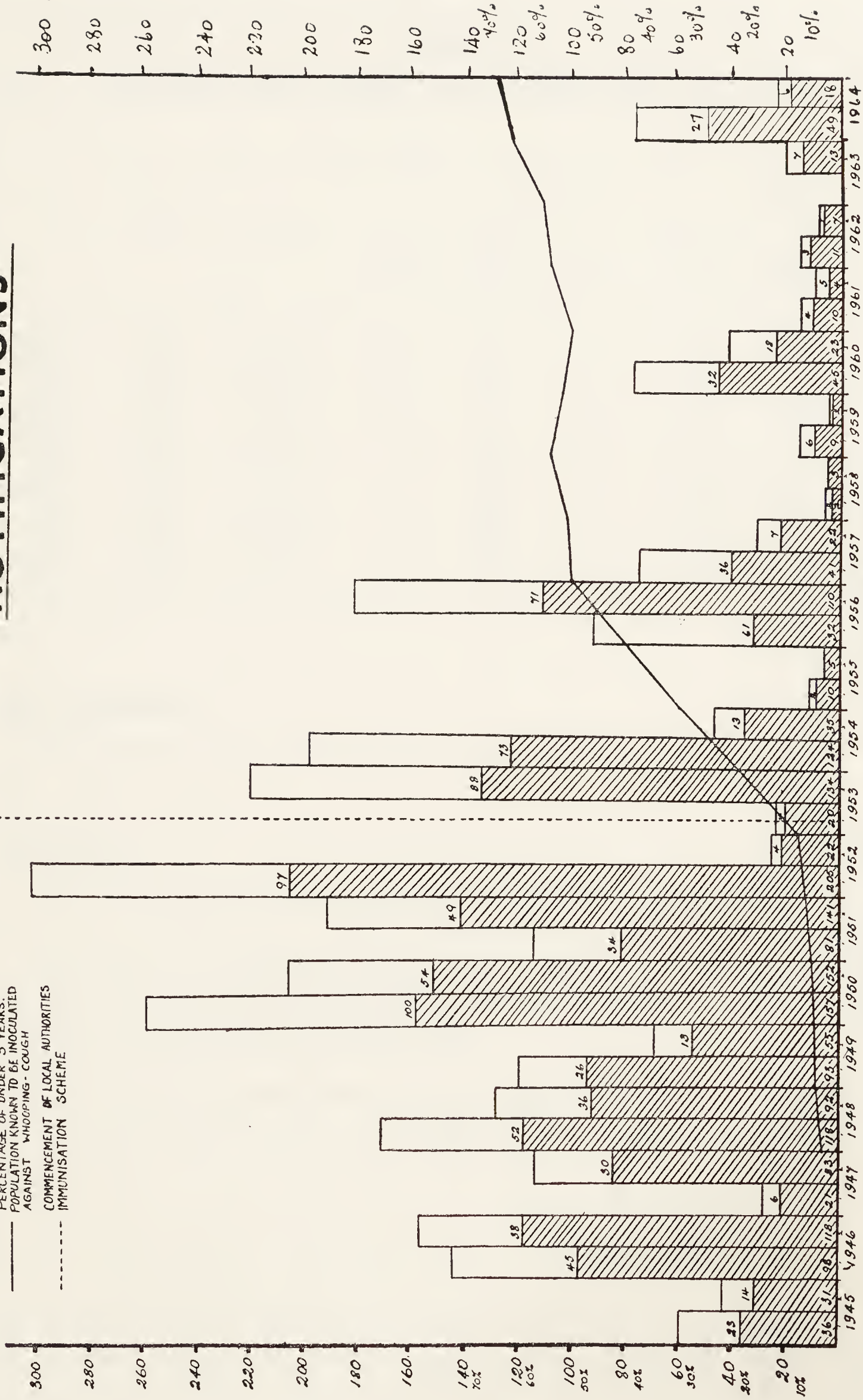
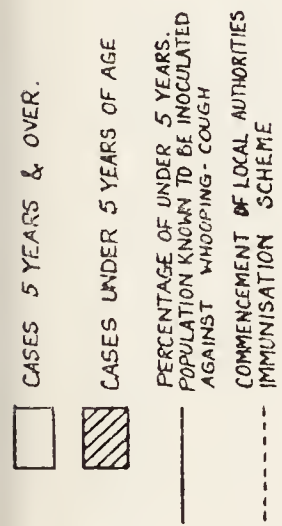
Table 35.
Whooping Cough Immunisation.

Number of Children receiving a full primary course of immunisation.

YEAR WHOOPING COUGH IMMUNISATION COMPLETED																
Annual Births	YEAR OF BIRTH															
	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	
2101	1962	1960	1914	1823	1832	1843	1933	1864	1964	2023	2037	2210	2070	2152	Total	
15															15	
87	22														109	
62	101	45													208	
121	193	750	131												1195	
48	85	172	813	173											1291	
32	31	47	126	773	187										1196	
69	52	42	53	112	807	210									1345	
11	43	40	22	44	110	782	192								1244	
6	17	72	88	56	74	136	890	200							1539	
8	4	10	82	78	25	45	119	685	192						1248	
3	3	13	22	101	59	39	51	186	871	228					1576	
6	9	10	21	22	97	76	57	93	227	976	186				1780	
—	—	—	—	6	6	76	86	25	32	143	800	163			1337	
—	—	—	—	—	—	17	92	101	36	69	250	1174	407		2146	
—	—	—	—	1	—	4	9	106	108	30	68	133	993	428	1880	
Total	468	560	1201	1358	1366	1365	1385	1496	1396	1466	1446	1304	1470	1400	428	18109

WHOOPING-COUGH

NOTIFICATIONS



• HALF-YEARS NUMBERED •

~ YEAR ~

Table 36.
Whooping Cough — Re-Inforcement Injections

Year of Injection	YEAR OF BIRTH														Total	
	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963		1964
1955	131	1	—	—	—	—	—	—	—	—	—	—	—	—	—	132
1956	132	159	9	1	—	—	—	—	—	—	—	—	—	—	—	301
1957	9	150	318	6	3	—	—	—	—	—	—	—	—	—	—	486
1958	11	16	408	465	5	2	—	—	—	—	—	—	—	—	—	907
1959	11	16	30	347	382	4	3	—	—	—	—	—	—	—	—	793
1960	9	8	17	40	376	403	10	1	1	—	—	—	—	—	—	865
1961	10	6	4	11	29	361	396	11	—	3	2	—	—	—	—	833
1962	1	15	2	2	3	9	364	303	2	3	7	2	—	—	—	713
1963	—	—	2	2	1	2	23	485	425	21	30	168	199	—	—	1358
1964	—	—	2	9	—	—	17	63	515	553	36	143	656	549	2	2545

Table 37.
Whooping Cough Incidence in Association with Immunisation.

Year	0—4 Years						5+ Years	
	Popula- tion	No. Immu- nised	Total Cases				Total Cases	
			Unim- munised	Group Attack Rate per 100	Immu- nised	Group Attack Rate per 100	Unim- munised	Immu- nised
1953	9,400	1,730	148	1.9	3	0.17	95	0
1954	9,200	2,818	153	2.4	7	0.25	85	0
1955	8,900	3,649	10	0.2	5	0.14	2	0
1956	8,800	4,441	126	2.9	16	0.36	124	8
1957	8,700	4,535	55	1.3	8	0.17	38	5
1958	8,700	4,679	3	0.07	2	0.04	2	0
1959	8,700	4,373	9	0.21	2	0.04	6	1
1960	8,900	4,492	59	1.34	9	0.20	37	13
1961	9,000	4,914	11	0.27	3	0.06	9	0
1962	9,300	5,107	14	0.36	4	0.08	3	1
1963	9,300	5,754	10	0.28	2	0.03	7	1
1964	9,500	6,048	52	1.54	15	0.25	24	9

Acute Encephalitis.

No case was notified in the Borough during the year.

Poliomyelitis.

No case was notified for the third year running.

Contacts of a confirmed case of poliomyelitis in a child in a neighbouring authority were the maternal grandparents who were resident in Preston. Virological investigations were negative in both cases.

The following tables show the number of vaccinations carried out during the year and the total number of children under sixteen years of age who have been protected.

Table 38.
POLIOMYELITIS VACCINATION, 1964

PRIMARY VACCINATION					
Age Group				Number of Persons who have received three doses of Oral Vaccine.	
Children born in 1964	..	..	..	289	
Children born in 1963	..	..	..	1120	
Children born in 1962	..	..	..	154	
Children born in 1961	..	..	..	52	
Children and Young People Born in Years 1943-1960	..	..	..	171	
Young Persons Born in Years 1933-1942	..	..	..	..	16
Others	..	..	..	..	15
Total				1817	

Reinforcing Doses.				
Number of persons given a reinforcing dose of Oral Vaccine after:	(i) 2 Salk doses	..	..	8
	(ii) 3 Salk doses			
	or 3 Oral doses or 2 Salk doses			
	Plus 2 Oral doses.	..	..	18
Total				26

Number of record cards submitted by general practitioners during the year.				
<i>Primary Courses</i>		<i>Reinforcing Doses</i>		
Salk	Oral	Oral		
—	183	15		

Table 39
POLIOMYELITIS VACCINATION

COURSE	YEAR OF BIRTH																Total
	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	
Two Injections + one Oral or three Oral	457	290	312	276	283	368	366	472	751	843	885	1149	1454	1612	1341	285	11144
Three Injections + one Oral	680	494	338	385	346	341	345	610	827	722	714	476	1	3	—	—	6282
Four Injections + one Oral	760	1060	1048	1034	990	832	719	507	—	—	—	—	—	—	—	—	6950
Total	1897	1844	1698	1695	1619	1541	1430	1589	1578	1565	1599	1625	1455	1615	1341	285	24,376

Estimated % of Population immunised .. **82.14**

Meningococcal Infection.

No cases were reported during the year.

Dysentery.

Twenty-three cases of dysentery were notified during the year, and of these 17 were confirmed bacteriologically. Five cases were notified from hospital. Most of the cases were sporadic in occurrence but there was one outbreak of Sh. Sonnei infection at a day nursery involving seven children.

Dysentery often poses a lingering problem in day nurseries and so a strict toilet procedure has to be adopted. This outbreak **was** rapidly contained and remained limited to one age-group which reflects creditably on the standard of hygiene maintained by the staff.

Enteric Fever.

No cases of typhoid or paratyphoid fever occurred during the year.

Food Poisoning.

Salmonella infections were at a low level during 1964. On only two occasions were two members of a family involved. *S. typhimurium* was isolated from two young children aged 8 months and 22 months, but not from a third who also had symptoms and was a twin of the younger case. *S. onireke* was isolated from two adult males who

were brothers, the infection being first discovered following biopsy of a mesenteric gland taken during an appendicectomy on one of them. There were no cases of food poisoning attributable to other organisms and those responsible for the Salmonella infections were:

<i>S. typhimurium</i>...	...	...	...	...	...	4
<i>S. onireke</i>	...	...	...	...	...	2
<i>S. tennessee</i>	...	...	...	...	...	1
<i>S. mons</i> ...	...	...	...	...	...	1

The Department receives from a number of sources information concerning persons with symptoms which require investigation as potential salmonella or shigella infections. These sources include formal notification by general practitioners, and informal information from general practitioners, schools, school-meals service, etc. During the year 218 cases were investigated and 299 specimens of faeces were submitted to the Public Health Laboratory for examination.

Scarlet Fever.

There were 56 notified cases during the year and four of these were admitted to hospital. There were no deaths.

In the autumn a haemolytic streptococcal infection, not associated with scarlet fever, was discovered in a small primary school. The infection came to light following information from hospital of two cases of nephritis among the pupils. Throat and nose swabs taken from all staff and children produced positives for *B* haemolytic streptococci from 18 children, but no staff, and 14 of these were Lancefield Group A. Eleven of the Group A were Griffiths type 12. Urine specimens from all children with positive swabs revealed two with albumen, red cells, and casts, but having no clinical signs. One of these cases, a flare-up of a previous attack of nephritis, was a carrier of *B* haemolytic streptococcus, Group A, type 6. All children with positive swabs were referred to their family doctors for treatment with antibiotics.

Infective Hepatitis.

There were 34 notifications of this disease during the year—the lowest since 1957, the first year of compulsory notification of infective hepatitis. In two cases the diagnosis could not be sustained in the light of the subsequent course of the illness. One, a middle-aged man was found to have carcinoma of the head of the pancreas from which he succumbed: the other, a man of 19 years, proved to have a haemolytic anaemia which responded to splenectomy.

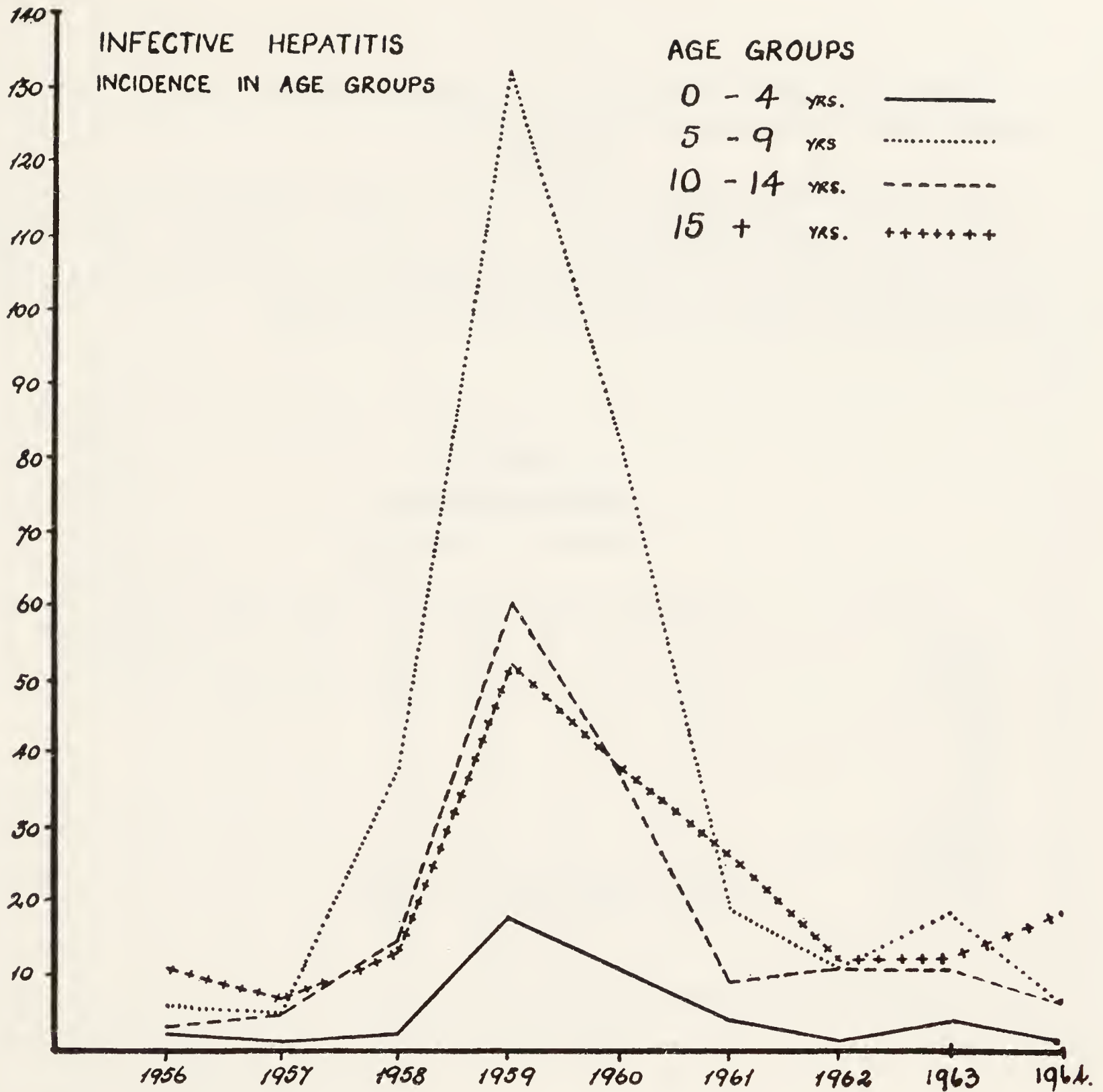
Of the 32 confirmed cases, 17 were males and 15 females. Over half of the cases (17) were in persons over 16 years. This is exceptional. Hitherto there has been a preponderance of schoolchildren, especially those of primary school age. The accompanying graph and histogram demonstrate this, while Table 40 shows the seasonal incidence.

INFECTIVE HEPATITIS INCIDENCE IN AGE GROUPS

AGE GROUPS

0 - 4 yrs. —————
 5 - 9 yrs.
 10 - 14 yrs. - - - - -
 15 + yrs. + + + + +

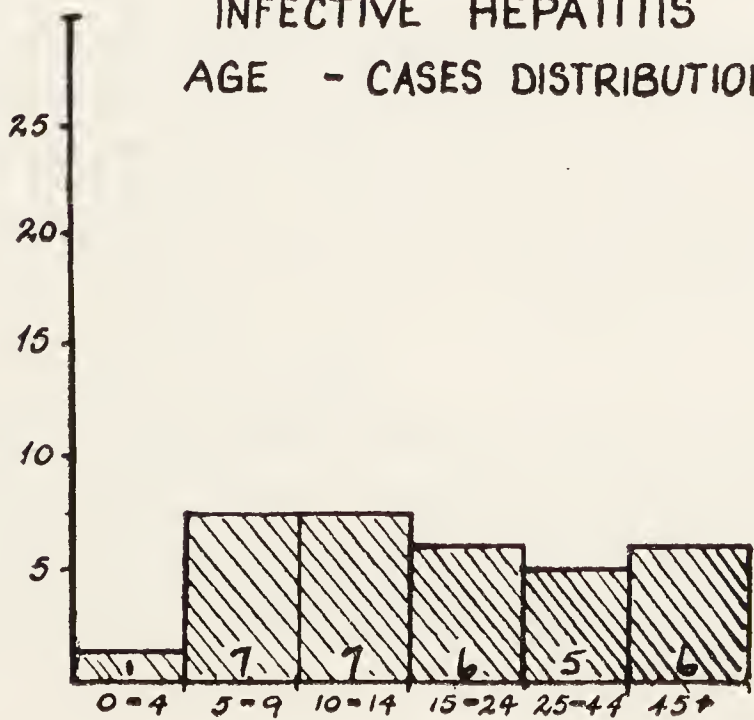
- NUMBER OF CASES -



- YEAR -

INFECTIVE HEPATITIS AGE - CASES DISTRIBUTION

- NUMBER OF CASES -



While cases occurred throughout the borough, forty per cent of them were confined to the Avenham and St. John's Wards.

As previously, the disease was largely mild in children although one boy required a term's home teaching following the acute attack, and another child became jaundiced three days after she had had her appendix removed. The adult cases were mainly moderately acute in severity and there was one death.

Table 40. Infective Hepatitis. SEASONAL INCIDENCE. YEAR										
<i>Month</i>		1956	1957	1958	1959	1960	1961	1962	1963	1964
January	...	6	5	2	35	19	10	2	5	3
February	...	—	1	3	18	13	5	—	6	—
March	...	7	1	—	16	25	9	2	3	2
April	...	8	2	—	26	25	8	4	5	—
May	...	7	1	1	30	11	7	2	2	1
June	...	10	1	4	20	10	3	3	1	2
July	...	3	1	8	26	10	6	2	4	2
August	...	3	2	10	15	11	3	4	2	4
September	...	*7	—	7	18	15	2	4	3	4
October	...	9	4	13	26	11	2	6	3	9
November	...	9	—	14	22	11	1	2	4	4
December	...	1	—	6	10	17	2	4	6	1
		70	18	68	262	178	58	35	44	32

* Notifiable from 17.9.56

Tuberculosis.

Fifty-five notifications of tuberculosis were received during 1964, which was one more than in 1963. The number of respiratory infections fell marginally from 48 in 1963 to 46 in 1964. However, the distribution of these between the sexes considerably altered. There were 32 males in 1964 as opposed to 26 in 1963 and 14 females as opposed to 22. The increased incidence noted last year in the female age-group 15-45 years was thus reversed.

There were nine deaths from all causes which compares with eleven in 1963. Twenty-four cases were notified as recovered from the disease. This compared with the abnormally high number, 115, so recorded in 1963. As a result the number remaining on the register at 31st December rose to 483 compared with 471 on 31.12.63.

Table 41.

Age periods	FORMAL NOTIFICATION													
	No. of Primary Notifications of new cases of Tuberculosis													
	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	Total All Ages
Respiratory, Males ...	—	—	1	1	—	—	2	8	7	6	3	4	—	32
Respiratory, Females ...	—	—	1	1	—	2	3	2	4	1	—	—	—	14
Non-Respiratory, Males ...	—	—	—	1	—	—	—	5	—	—	—	—	1	7
Non-Respiratory, Females ...	—	—	—	—	—	—	—	2	—	—	—	—	—	2

Table 42. Notification Register.

	Respiratory			Non-respiratory			Total Cases
	Male	Female	Total	Male	Female	Total	
Number of cases of Tuberculosis remaining on the 31st December, 1964, on the Register of Notifications kept by the Medical Officer of Health ...	233	171	404	28	51	79	483
Number of cases removed from the Register during the year by reason, <i>inter alia</i> , of :—							
1. Withdrawal of notification ...	—	—	—	—	—	—	—
2. Recovery from the disease... ..	10	11	21	2	1	3	24
3. Deaths (all causes) ...	4	2	6	—	—	—	6
4. Outward Transfers ...	4	—	4	—	—	—	4
5. Otherwise (Lost sight of, etc.) ...	2	1	3	—	—	—	3

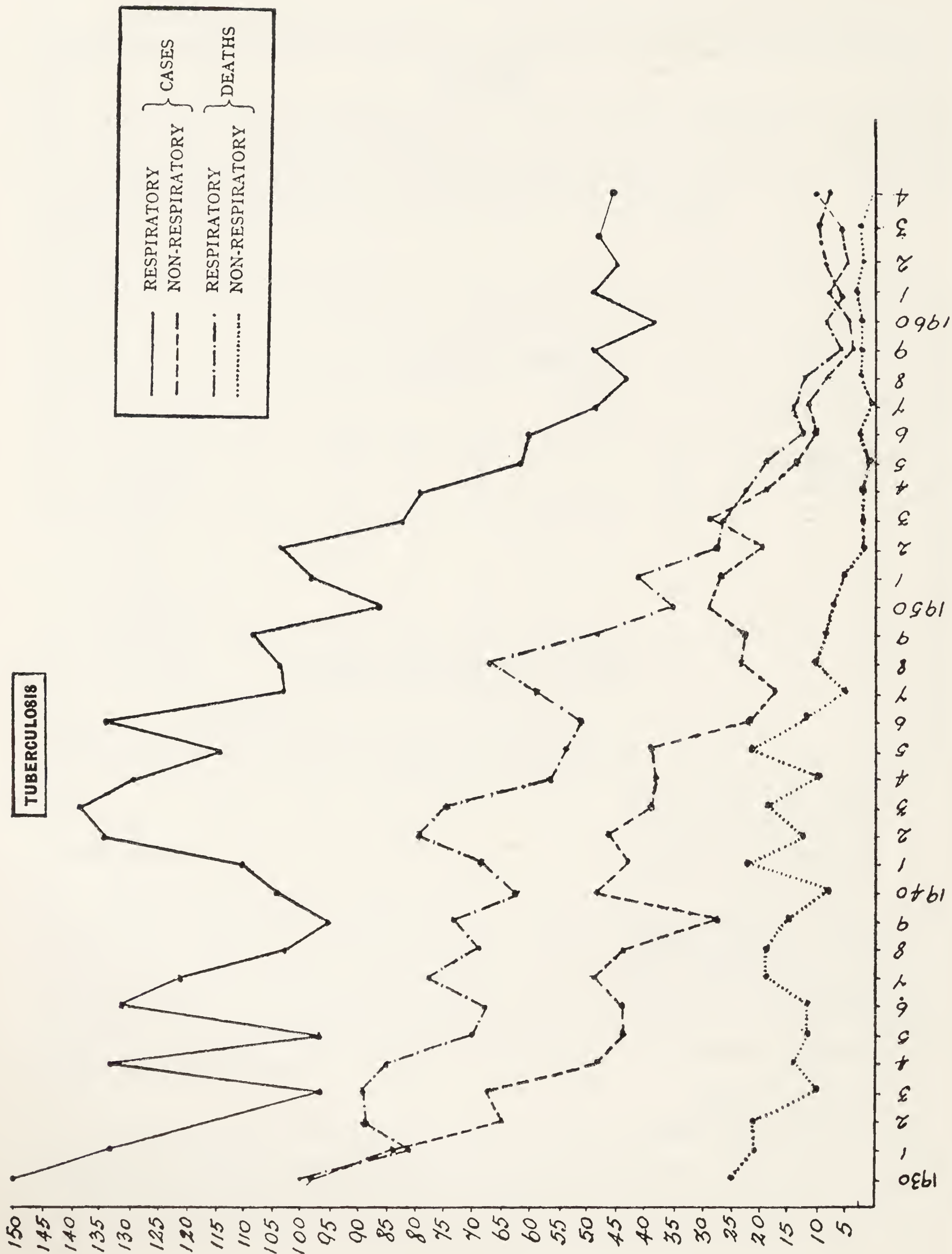


Table 43.
Tuberculosis.

Population	Year	No. of cases notified		Rates per 1,000 population		No. of Deaths		Rates per 1,000 population	
		Respiratory	Non-Respiratory	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
126100	1930	150	97	1.19	.77	100	25	.79	.20
120100	1931	133	84	1.12	.71	82	21	.69	.18
118500	1932	116	65	.98	.55	89	21	.75	.18
117800	1933	96	67	.81	.57	89	10	.76	.08
117490	1934	133	48	1.13	.41	85	14	.72	.12
116200	1935	96	44	.83	.38	70	12	.60	.10
115200	1936	131	44	1.14	.38	68	12	.59	.10
113600	1937	121	49	1.07	.43	77	19	.68	.17
113600	1938	103	44	.91	.39	69	19	.61	.17
112800	1939	95	27	.84	.24	73	15	.65	.13
108500	1940	104	47	.96	.43	63	8	.58	.07
111490	1941	110	43	.99	.39	68	22	.61	.20
110000	1942	133	46	1.21	.42	79	12	.72	.11
109100	1943	138	39	1.26	.36	74	18	.68	.16
108190	1944	129	38	1.19	.35	56	10	.52	.09
108480	1945	114	39	1.05	.36	54	21	.50	.19
114070	1946	134	21	1.17	.18	52	12	.46	.10
116520	1947	103	17	.90	.15	59	5	.51	.04
118130	1948	104	23	.88	.19	66	10	.56	.08
119500	1949	107	22	.90	.18	48	9	.40	.08
120300	1950	86	29	.71	.24	35	7	.29	.06
118100	1951	97	27	.82	.23	41	5	.35	.04
119200	1952	103	19	.86	.16	27	1	.23	.01
118900	1953	82	29	.69	.24	26	1	.22	.01
118400	1954	79	19	.67	.16	22	1	.19	.01
117400	1955	61	13	.52	.11	19	—	.16	—
117200	1956	60	10	.51	.08	11	1	.09	.01
116200	1957	49	11	.42	.09	13	—	.11	—
115100	1958	43	8	.37	.07	11	1	.09	.01
114200	1959	48	3	.42	.03	5	1	.04	.01
113460	1960	39	4	.34	.03	7	1	.06	.01
113170	1961	49	7	.43	.06	5	2	.04	.02
112130	1962	45	5	.40	.04	8	1	.07	.01
111670	1963	48	6	.43	.05	10	3	.09	.03
110390	1964	46	9	.42	.08	9	—	.08	—

Prevention of Illness, Care and After-Care as applied to Tuberculosis.

Domiciliary follow-up of cases of tuberculosis, who are being treated at home, is undertaken by the health visitors in the normal course of their duties. The health visitors also investigate all households when new cases are notified to ascertain and arrange for the examination of contacts. During the year a total of 381 households were visited.

Under the scheme for the examination of contacts 341 persons were skin tested at the Chest Clinic and 102 were found to have positive reactions. The remainder who had negative reactions, 239, were given B.C.G. vaccination. A further 36 infants were vaccinated without prior skin-tests.

The night sanatorium arrangements remained unchanged during the year. Two chalets were permanently occupied all year, and a third was occupied for a period of three months. There were two chalets vacant at the year's end.

The mobile caravan from the Mass Radiography Unit made its annual visit in the spring and operated in the eastern third of the Borough where 8,739 persons volunteered for X-ray. Six persons were found to have active pulmonary tuberculosis, fourteen to require further observation, and five to have cancer of the lung.

B.C.G. Vaccination.

Consent for vaccination was given by the parents of 1,276 children out of a total of 1,686 who were in their fourteenth year. This number of acceptances is 76% of the total and is at a similar level to previous years.

Heaf tests were carried out on 1,110 of those consenting and also on 131 defaulters from previous years. A total of 1,002 children were found to have negative reactions and 998 were given B.C.G. vaccination.

Among the positive reactors 56 were found to be strongly positive and these were referred to the Chest Clinic for X-ray.

Table 44.
B.C.G. Vaccination of thirteen-year-old school children.

	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
No. tuberculin tested ...	925	1,037	1,039	982	1,071	1,033	1492	1512	1454	1524	1241
No. of tuberculin positives	249	253	286	269	245	190	265	272	296	319	239
Percentage positive reaction to total tuberculin tested ...	26.9	24.4	27.5	27.4	22.9	18.4	17.76	17.99	20.36	20.93	19.26
No. of tuberculin negatives	675	784	753	713	824	843	1227	1240	1158	1205	1002
No. vaccinated ...	675	784	745	705	804	820	1219	1230	1150	1202	998
No. of vaccinated who were tuberculin negative at 12+ weeks after vaccination ...	4	184	3	7	83	49	24	13	—	—	—

Treatment of Scabies and Verminous Heads.

Greenbank Clinic operated as the main cleansing centre while Cuttle Street Clinic was used as an additional centre for treatment of verminous heads.

There was some increase in the incidence of scabies particularly among adults.

Table 45 gives details of persons treated during the year.

Table 45.									
	GREENBANK				CUTTLE STREET				
	Scabies		Verminous Heads		Scabies		Verminous Heads		
	Cases	Treat-ments	Cases	Treat-ments	Cases	Treat-ments	Cases	Treat-ments	
Men	15	26	—	—	—	—	—	—	
Women	24	47	—	—	—	—	2	2	
Boys (under 14) ...	28	51	223	223	—	—	270	270	
Girls (under 14) ...	28	55	859	859	—	—	737	737	
TOTAL ...	95	179	1082	1082	—	—	1009	1009	

Venereal Diseases.

The arrangements relating to the control of venereal disease remained unchanged during the year. The venereal diseases social worker continued to function under the direction of the consultant at the clinic in Preston Royal Infirmary. Some 350 letters were sent out from the clinic and home visits were paid in 35 cases. Routine enquiry continues to be made on all ships by the Port Health Inspector and generally speaking seamen do not hesitate to come forward for treatment. Seamen seen at the clinic during the year numbered 61 as opposed to 46 in 1963.

Table 46 shows the numbers of new cases of gonorrhoea and syphilis attending Preston Royal Infirmary over the last six years.

Table 46.							
Preston County Borough.							
Venereal Disease—New Cases.							
	1964	1963	1962	1961	1960	1959	
Gonorrhoea... ..	187	184	179	173	151	105	
Syphilis	16	19	19	11	13	15	

Sanitary Circumstances of the Area

1. Water.

Water is supplied to the town by the Preston and District Water Board and the sources of supply remain unchanged from previous years. The water supply is satisfactory in quantity and quality except for the disturbance of mains sludge in the autumn.

The Manager of the Water Board has kindly supplied the following information :

Bacteriological analyses were made of the raw water as follows :

52 samples from the intakes.

16 samples from the aqueducts.

31 samples from the storage reservoirs.

107 samples from consumers' premises.

The results of the first three groups naturally varied fairly widely and faecal *B. coli* were present in 58 samples, all prior to any treatment. Nineteen samples of water were taken by the Sampling Officer, thirteen of which were satisfactory and six which contained Coliform Bacilli were classified unsatisfactory.

At the end of August and on into the following month, positive *B. Coli* counts persisted in the Preston area and some of the more distant areas supplied through and beyond the Preston system due to a disturbance of mains sludge caused by a general overall improvement of pressure. During this period the chlorine residuals were considerably increased and eventually an ammoniator was installed at the Treatment Plant to enable the higher residuals to carry through to the far ends of the distribution system. This was successful and residuals of 0.25 p.p.m. were maintained for a while ; it has now been found possible to reduce this to something of the order of 0.11 to 0.13 p.p.m.

A series of samples taken up to and including January, 1963 from different sectors of the Borough showed the Preston and District Water Board supply to contain fluoride in amounts varying from 0.03 to 0.06 parts per million.

The water in the Preston area is subjected by automatically controlled pH adjustment to a figure of 8.1 on leaving the White Bull Treatment Station to avoid plumbo solvent action.

With the exception of one property the whole of the Borough is supplied directly from the Board's mains. The approximate number of dwellings on the mains supply is 37,299.

No supplies are normally by stand pipes.

Details of a recent chemical analysis of water taken in Preston are as follows :—

Physical Character—

Appearance	...	...	...	...	...	...	Clear & Colourless
Colour (Hazen Units)	...	...	...	...	...	...	5
Odour	...	...	...	...	...	...	Nil
pH	...	...	...	...	...	...	7.0

Analytical Returns expressed in parts per million—

Solids in solution	...	...	...	...	...	...	84
Solids in suspension	...	...	...	...	...	...	Nil
Total hardness	...	...	...	...	...	...	33
Carbonate Hardness	...	...	...	...	...	...	25
Non-carbonate Hardness	...	...	...	...	...	...	8
Excess Alkalinity expressed as Sodium Carbonate	...	...	...	...	...	...	Nil
Free Carbon Dioxide	...	...	...	...	...	...	5
Combined Chlorine	...	...	...	...	...	...	12
Free Chlorine	...	...	...	...	...	...	Nil
Sulphates (SO ₃)	...	...	...	...	...	...	11
Nitrous Nitrogen	...	...	...	...	...	...	Nil
Nitric Nitrogen	...	...	...	...	...	...	0.59
Ammoniacal Nitrogen	...	...	...	...	...	...	0.08
Albuminoid Nitrogen	...	...	...	...	...	...	0.10
Sodium as (Na).	...	...	...	...	...	...	8
Oxygen absorbed in four hours at 27°C.	...	...	...	...	...	...	0.77
Calcium (Ca).	...	...	...	...	...	...	6
Lead	...	...	...	...	...	...	Negligible
Iron (Fe.)	...	...	...	...	...	...	0.05
Manganese (Mn.)	...	...	...	...	...	...	Nil
Magnesium	...	...	...	...	...	...	4

Remarks :

APPROXIMATE MINERAL COMPOSITION

Calcium Carbonate	...	...	...	...	...	...	16
Magnesium Sulphate	...	...	...	...	...	...	12
Magnesium Carbonate	...	...	...	...	...	...	9
Sodium Sulphate	...	...	...	...	...	...	5
Sodium Chloride	...	...	...	...	...	...	18

2. Public Swimming Baths.

The following information has been supplied by the Baths Superintendent :—

All swimming baths within the Borough are controlled by the Corporation. They consist of :

THREE OPEN-AIR POOLS

<i>Situation</i>		<i>Dimension</i>	<i>Capacity</i>	<i>Frequency of Water Change</i>
Moor Park	... ..	100 ft. × 50 ft.	109,400 gals.	3 hours
Haslam Park	... ..	100 ft. × 50 ft.	148,500 gals.	4 hours
Ribbleton Park	... ..	100 ft. × 50 ft.	148,500 gals.	4 hours

The water in these pools is clarified by Pressure Filters air scoured for back wash and sterilized by modern chlorination plants maintaining a free chlorine content of from .75 to 1.0 p.p.m. at the outlet.

ONE INDOOR ESTABLISHMENT COMPRISING TWO POOLS

<i>Situation</i>		<i>Dimension</i>	<i>Capacity</i>	<i>Frequency of Water Change</i>
Saul Street :				
Large Pool	... ..	100 ft. × 42 ft.	140,000 gals.	4 hours
Small Pool	... ..	60 ft. × 30 ft.	56,000 gals.	4 hours

The large pool is converted to a dance and concert hall during the winter months.

The water in these pools is heated, and clarified by means of pressure filters with mechanical agitation for back washing and sterilized by a modern chlorination plant maintaining a free chlorine content of from .75 to 1.0 p.p.m. at the outlet.

At all swimming pools water for the initial filling and make up water after back washing is taken from the town's water supply.

Sulphate of Alumina is added for filter flocculation and a pH value of 7.6 to 8.0 maintained by the addition of Soda Ash.

Tests for free chlorine and pH value are taken twice daily and at all peak bathing periods. In addition to these manual tests there is at the indoor pool a 24-hour daily graph reading made by an automatic chlorine recorder.

At all pools readings of free and combined chlorine, pH, water temperature, number of bathers, date of filter back wash, state of weather, are entered in a daily log book, as is also the rate of filter turnover.

A three-year maintenance cycle is carried out at all the pools, and in addition extensive reconditioning of the filter tanks and strainers was carried out.

Two samples of swimming baths water taken from the indoor baths and three samples from the outdoor baths submitted by the sampling officer for bacteriological examination were all found to be highly satisfactory.

3. Sewerage.

Sewerage provision in the main in Preston is reasonably good and in the year under review has been improved by the provision of relief sewers at Inkerman Street, Shelley Road and Blackpool Road to overcome surcharging of the existing sewers. Connections to sewers in lieu of septic tank treatment have been provided at Fir Trees Avenue.

The plans for the redevelopment of the Freckleton sewage works and the provision of secondary as well as primary treatment are now well advanced and it is hoped to obtain ministerial approval to the scheme during the forthcoming year.

4. General Sanitary Defects.

The following table shows the work carried out under the public health and housing acts in relation to dwellinghouses during 1964 :—

Table 47.
Sanitary Improvements effected under the Public Health and Housing Acts.

Chimneys repaired or renewed	4
Closet conversions	15
Dampness remedied	40
Downspouts repaired or renewed	41
Drains or sewers cleansed	185
Drains or sewers tested	66
Drains or sewers repaired or renewed	103
Dustbins provided	24
Fireplaces repaired or renewed	11
Floors repaired or renewed	7
Food preparing premises cleansed	2
Food storage provided or repaired	1
Nuisances abated (general)	117
Passages or yard surfaces flagged, etc.	1
Plasterwork repaired or renewed	45
Premises disinfested or cleansed	77
Premises treated for rats or mice or rendered rodent-proof	135
Roofs repaired or renewed	64
Sinks repaired or renewed	11
Walls repaired or renewed	12
Water service pipes repaired or renewed	24
W.C. accommodation provided, improved, repaired or renewed	84
Windows repaired or renewed	15
Woodwork (general) repaired or renewed	19
Other work done	10

A total of 202 informal notices and 54 statutory notices were served under the Public Health Act during the year. The latter are itemised in Table 48.

Financial assistance was given under Section 47 of the Public Health Act in the provision of water closets to replace existing waste-water closets at thirteen premises.

A firelighter company was prosecuted under Section 1 of the Clean Air Act, 1956 for emissions of dark smoke in contravention of the Act. A fine of £10 was imposed.

A leather firm was prosecuted under Section 1 of the Clean Air Act, 1956 for emissions of dark smoke in contravention of the Act. A fine of £10 was imposed.

A car wash service firm was prosecuted under Section 1 of the Noise Abatement Act for failing to comply with an abatement notice requiring the abatement of a noise nuisance within twenty-four hours. A nuisance order was made prohibiting the noise nuisance forthwith.

Table 48.
Summary of Statutory Notices served under Public Health Act, 1936 and 1961.

<i>Section</i>	Public Health Act 1936	<i>Number served</i>
39	Drainage	14
40	Soil pipes, etc.	1
45	Closet accommodation	9
51	Water supply to w.c. cisterns	1
83 (as amended by Sec. 25 P.H.A. 1961)	Filthy or verminous premises	3
89	Sanitary accommodation at Inns, etc.	1
92/93	Abatement notices (statutory nuisances)	25
		<hr/> 54 <hr/>

5. Tents, Vans and Sheds.

Two sites are occupied by accredited members of the Showmen's Guild as winter quarters, the land being owned by the occupants. One other site is licensed under the provisions of the Caravan Sites and Control of Development Act.

Seventy-nine visits were paid to caravan sites during the year.

6. Common Lodging Houses.

There are two common lodging houses in the Borough. Twelve visits were paid to these premises during the year.

7. Places of Public Entertainment.

There are 7 premises licensed for cinematograph exhibitions. Eighteen premises are licensed for the purpose of public dancing and 6 for stage plays. Forty-seven visits were made to these places of public entertainment.

8. Offensive Trades.

Several of the offensive trades established in the Borough have been established since before the inception of the Public Health Act, 1875, ten only being required to make application for periodic renewal of their licence in accordance with Section 107, Public Health Act, 1936. Thirty-three visits were made to offensive trades premises.

9. Disinfection and Disinfestation.

In 281 cases furniture from infested unfit houses was sprayed.

Four hundred and twenty-two rooms were sprayed with insecticide to combat various infestations. Ten rooms were treated after the occurrence of infectious disease.

The service is maintained by a staff of three, and together with the necessary transport these men run a general transport pool for all sections of the Health Department.

10. Factories.

Factories Act, 1961

Table 49. Inspections.				
Premises	No. on the Register	No. of Inspections	No. of written notices	No. of Prosecutions
Non-mechanical factories in which Sections 1, 2, 3, 4 and 6 are enforced by the Local Authority	95	7	1	—
Mechanical factories in which Section 7 is enforced by the Local Authority	777	71	7	—
Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)...	50	2	—	—
Totals	922	80	8	—

Table 50.
Defects.

Particulars and Section	No. of defects found	No. of defects remedied	No. referred		No. of Prosecutions
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1) ...	—	1	—	—	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4) ...	—	—	—	—	—
Ineffective drainage of floors (S.6)... ..	—	—	—	—	—
Sanitary conveniences (S.7)—					
(a) insufficient ...	—	—	—	—	—
(b) unsuitable or defective ...	16	14	—	12	—
(c) not separate for sexes ...	1	—	—	—	—
Other offences against the Act...	—	—	—	—	—
Totals	17	15	—	12	—

11. Outworkers.

Table 51.
(Sections 133 and 134).

Nature of Work	Section 133			Section 134		
	No. of outworkers in August list required by Section 133(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel, Making, etc. }	3	—	—	—	—	—

12. Rodent Control.

During the year two operators were employed on pest extermination.

The Chief Public Health Inspector attended several Lancashire County Consultative Committee and North West Lancashire Representative Committee meetings as a representative of this Authority.

During the year two poison treatments of the sewers were carried out, 2,884 manholes being poison baited. To facilitate this work men were loaned by the Borough Surveyor, supervision being carried out by the public health inspectors.

The work of the staff in the county borough is summarised in Table 52.

13. Offices, Shops and Railway Premises Act, 1963.

The health and welfare provisions of the Shops Act, 1950 were repealed by the Offices, Shops and Railway Premises Act, 1963 which came into force on 1st May, 1964. An Order made under the Act prescribes information to be submitted to the Minister of Labour. The following tables show the returns rendered on Form OSR 14 for the year under review.

Table 53. Registrations and General Inspections.			
Class of Premises	No. of premises registered during the year	Total number of registered premises at end of year	No. of registered premises receiving a general inspection during the year
Offices	453	450	91
Retail shops	592	591	157
Wholesale shops, warehouses	79	79	4
Catering establishments open to the public, canteens ..	112	112	8
Fuel Storage depots ..	5	5	—
Totals	1,241	1,237	260

Table 54
Number of Visits of all kinds by Inspectors to Registered Premises
 442.

Table 55 Analysis of Persons employed in Registered Premises by Workplace.	
Class of workplace	No. of persons employed
Offices	6,659
Retail shops	3,850
Wholesale departments, warehouses	1,318
Catering establishments open to the public	978
Canteens	76
Fuel storage depots	55
Total	12,936
Total Males	5,526
Total Females	7,410

Table 52.
Prevention of Damage by Pests Act, 1949.

	Type of Property				
	(1) Local Authority	(2) Dwelling houses	(3) All other (including Business and Industrial)	(4) Total of (1), (2) and (3)	(5) Agri- cultural
I. Number of properties in Local Authority's District	125	35,631	7,492	43,248	55
II. Total number of properties inspected as a result of notification	120	278	118	516	1
Number of such properties found to be infested by :—					
Common rat { Major Minor	— 56	— 149	5 77	5 282	— 1
Ship rat { Major Minor	— —	— —	— —	— —	— —
House mouse { Major Minor	— 26	1 37	— 41	1 104	— —
III. Total number of properties inspected in the course of survey under the Act	9	14	7	30	2
Number of such properties found to be infested by :—					
Common rat { Major Minor	— —	— 2	— 2	— 4	— 2
Ship rat { Major Minor	— —	— —	— —	— —	— —
House mouse { Major Minor	— —	— —	— —	— —	— —
IV. Total number of properties otherwise inspected (e.g. when visited primarily for some other purpose)	—	—	—	—	—
Number of such properties found to be infested by :—					
Common rat { Major Minor	— —	— —	— —	— —	— —
Ship rat { Major Minor	— —	— —	— —	— —	— —
House mouse { Major Minor	— —	— —	— —	— —	— —
V. Total inspections carried out — including re-inspections	604	1,469	749	2,822	8
VI. Number of infested properties (in Sections II, III & IV) treated by the Local Authority	45	123	73	241	—
VII. Total treatments carried out	45	123	73	241	—
VIII. Number of notices served under Section 4 of the Act : (a) Treatment (b) Structural work (i.e. proofing)	— —	— —	2 —	2 —	— —
IX. Number of cases in which default action was taken following the issue of a notice under Section 4 of the Act	—	—	—	—	—
X. Legal Proceedings	—	—	—	—	—
XI. Number of 'Block' control schemes carried out	Nil.				

Table 56 — Exemptions

Table 56 — Exemptions						
(1)	No. of exemptions current at 31st Dec. (2)	No. of exemptions granted or extended during year (3)	No. of applications refused or exemptions withdrawn during year (4)	No. of cases in cols. (4) & (5) where employees opposed application (5)	Appeal to Courts against refusal to grant or extend an exemption or against the withdrawal of an exemption	
					No. made (6)	No. allowed (7)
			Part I—Space (Sec. 5(2))			
Offices	—	—	—	—	—	—
Retail shops	—	—	—	—	—	—
Wholesale shops, warehouses..	—	—	—	—	—	—
Catering establishments open to public, canteens	—	—	—	—	—	—
Fuel storage depots	—	—	—	—	—	—
			Part II—Temperature (Sec. 6)			
Offices	—	—	—	—	—	—
Retail shops	—	—	—	—	—	—
Wholesale shops, warehouses..	—	—	—	—	—	—
Catering establishments open to public, canteens	—	—	—	—	—	—
Fuel storage depots	—	—	—	—	—	—
			Part III—Sanitary Conveniences (Sec. 9)			
Offices	—	—	—	—	—	—
Retail shops	—	—	—	—	—	—
Wholesale shops, warehouses..	—	—	—	—	—	—
Catering establishments open to public, canteens	—	—	—	—	—	—
Fuel storage depots	—	—	—	—	—	—
			Part IV—Washing Facilities (Sec. 10)			
Offices	—	—	—	—	—	—
Retail shops	—	—	—	—	—	—
Wholesale shops, warehouses..	—	—	—	—	—	—
Catering establishments open to public, canteens	—	—	—	—	—	—
Fuel storage depots	—	—	—	—	—	—

Table 57
Prosecutions.

Prosecutions instituted of which the hearing was completed in the year.

Section of Act or title of Regulation or Order	No. of persons or companies prosecuted	No. of informations laid	No. of informations leading to a conviction
—	—	—	—

Number of complaints (or summary applications) made under section 22 .. Nil
Number of interim orders granted Nil

Table 58
Inspectors.

All public health inspectors (15) are appointed as inspectors under the Act but only one carries out full-time duties in respect thereof.

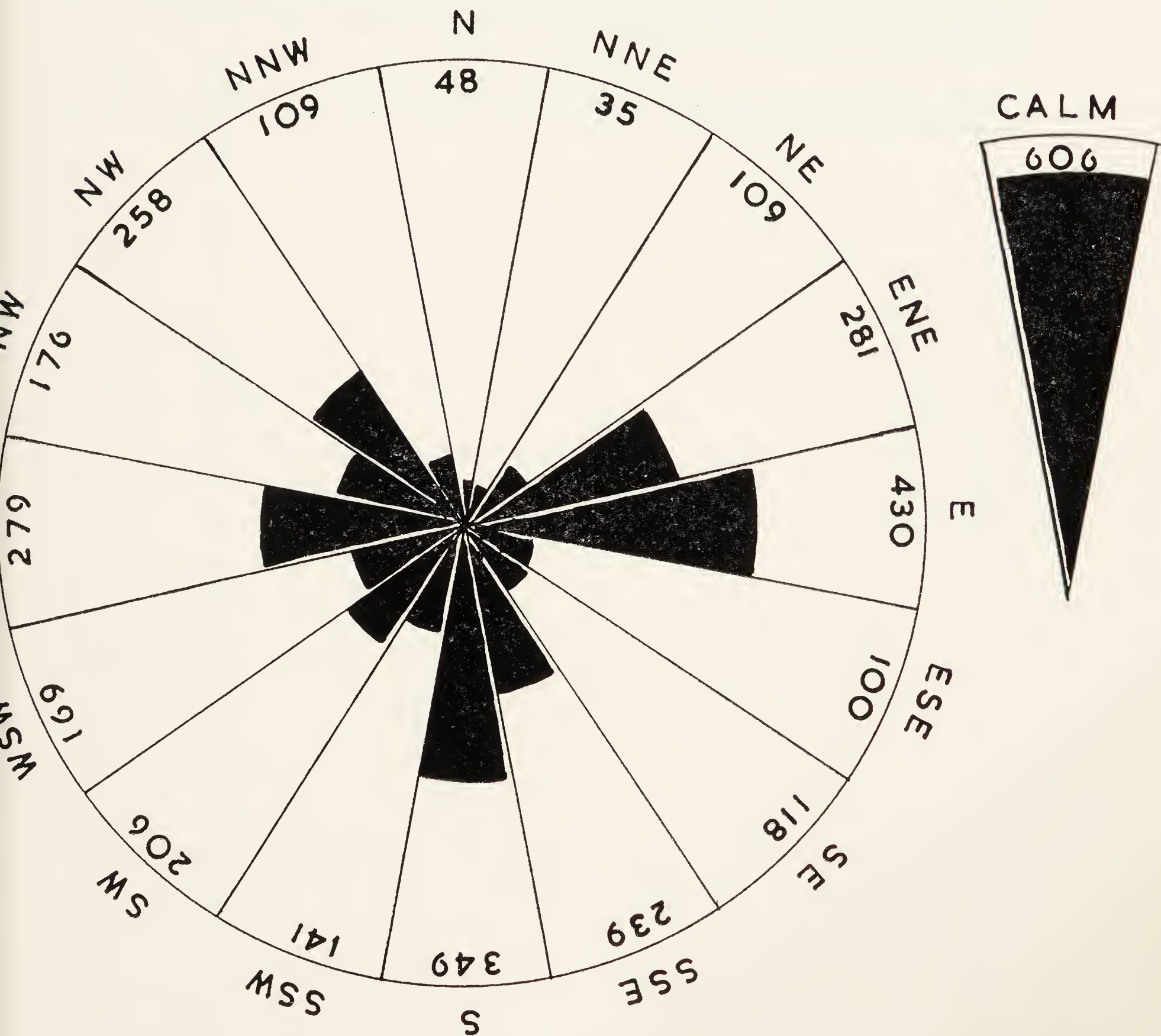
No. of inspectors appointed under section 52(1) or (5) of the
Act 1
No. of other staff employed for most of their time on work
in connection with the Act Nil

During the year six accidents were reported under the provisions of Sec. 48, Offices, Shops and Railway Premises Act.

14. Atmospheric Pollution.

WIND DIRECTIONS, 1955-64.

The following diagram shows the frequency of wind direction during the ten years 1955-1964 recorded daily at the Moor Park Observatory.



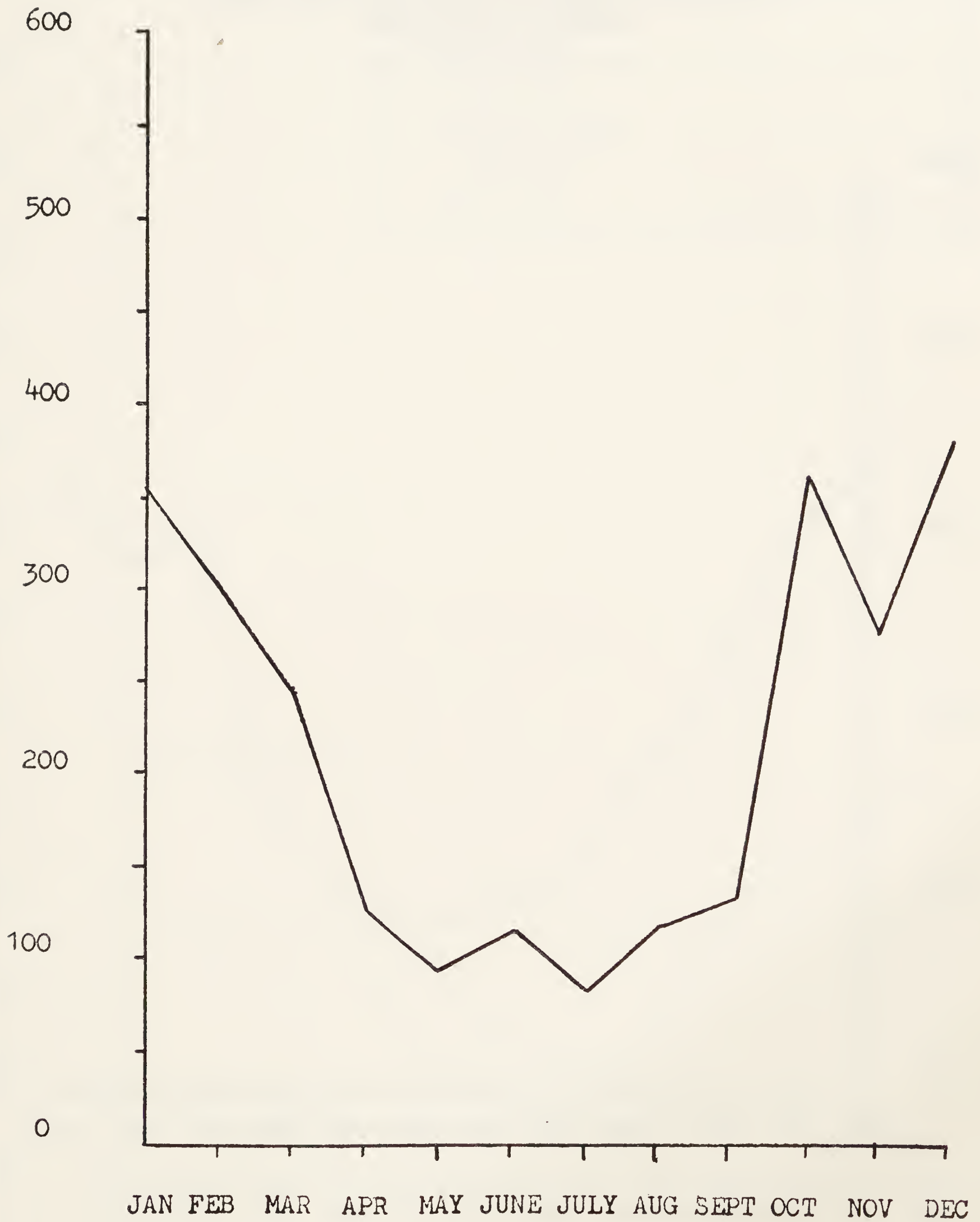
Smoke Abatement.**ITS MEASUREMENT.**

Since 1951 measurements of atmospheric pollution have been taken latterly at five points in the town.

The monthly average for 1964 of smoke concentration as measured by the volumetric apparatus in Lancaster Road is shown in Graph I and Graph II shows the average monthly concentration of sulphur dioxide in microgrammes per cubic meter as determined from the same apparatus.

The records of measurement of pollution obtained from the four deposit gauge stations are shown in Graph III.

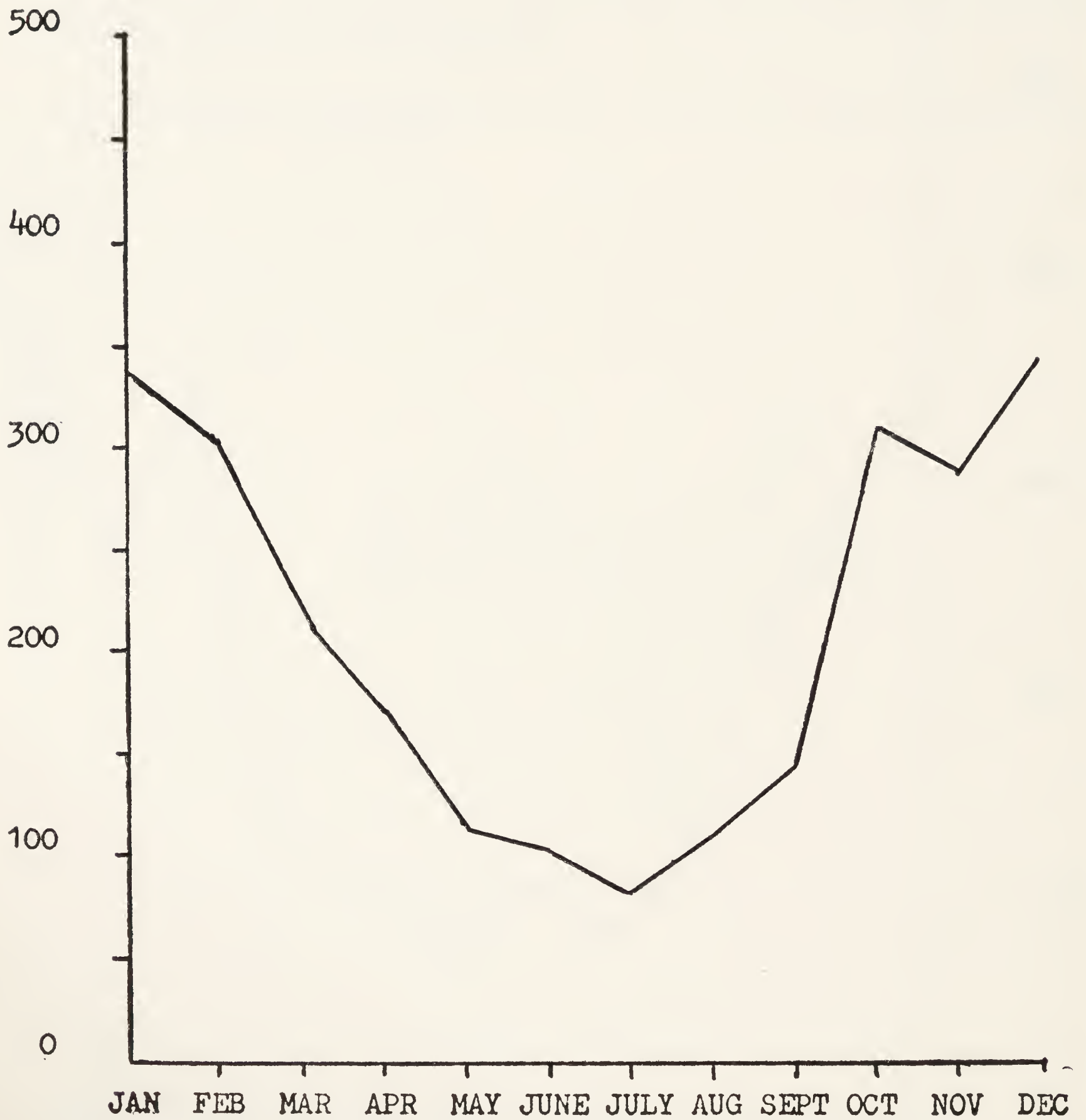
Graph I.
Concentration of Smoke—Microgrammes per Cubic Metre.
Average for Each Month
by Volumetric Apparatus.



Graph II.

**Concentration of SO₂—Microgrammes per Cubic Metre.
Average for Each Month**

by Volumetric Apparatus.



Graph III.

Sulphur by Lead Dioxide Method.
Weight of SO₃ collected Mg/100 sq. cm./day.

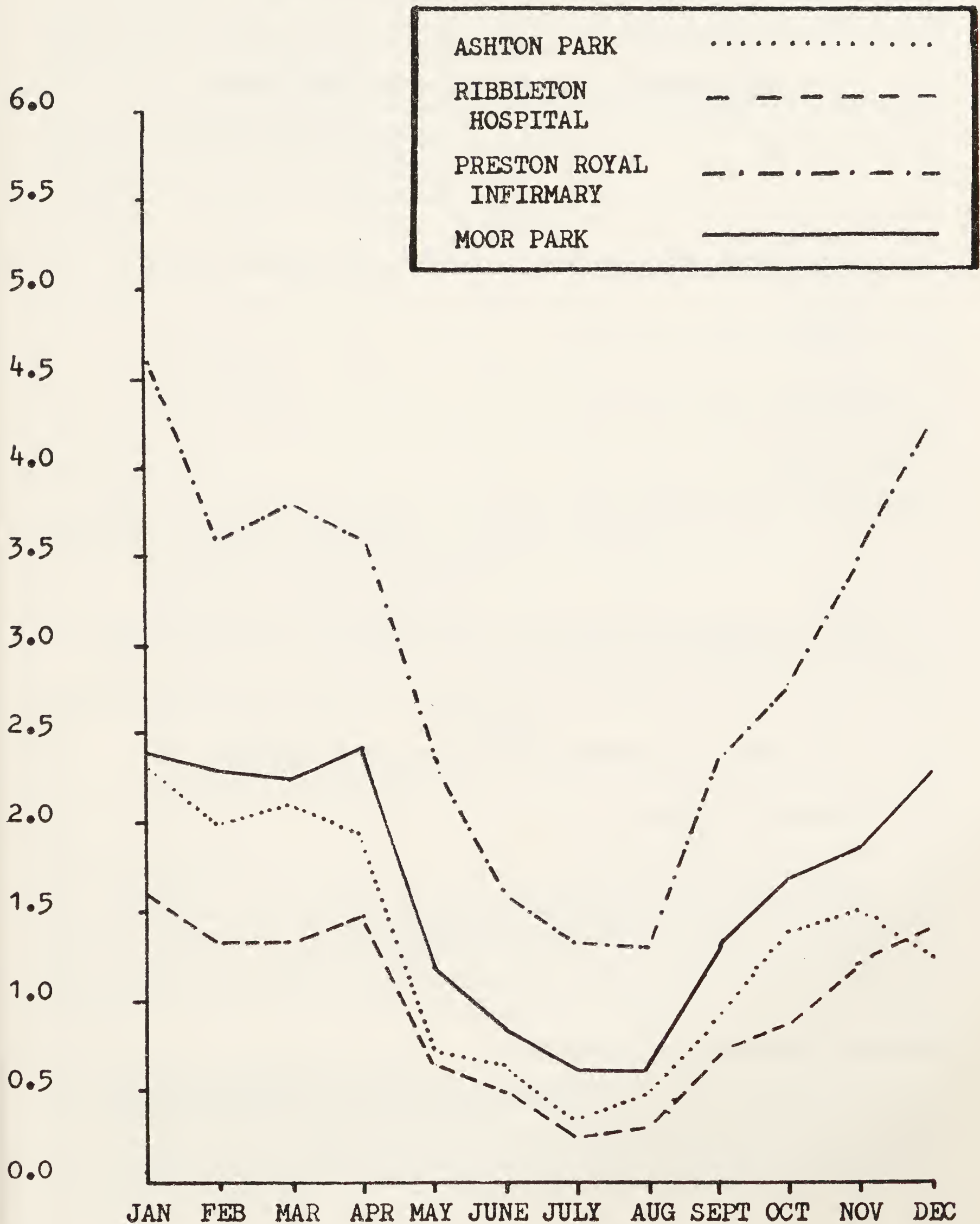


Table 59 gives the average deposit each month of solids in tons per square mile at each of the four stations.

Table 59. Measurement of Deposited Matter by Deposit Gauge.				
	Average figures per month			
	Ashton Park	Ribbleton Hospital	P.R.I.	Moor Park
Rain in inches	2.44	2.61	2.73	2.74
Total dissolved matter in tons per square mile	6.59	6.35	7.21	4.51
Total insoluble matter in tons per square mile	5.50	3.56	10.58	4.41
Soluble matter in CS ₂ in tons per square mile	0.09	0.07	0.11	0.06
Other combustibles in tons per square mile	1.99	1.46	4.74	1.38
Total solids in tons per square mile	12.09	9.91	17.79	8.92

ITS CONTROL.

General surveillance of the town has been carried out during the year and visits of inspection and observation made as set out in Table 60.

Table 60. Visits in connection with Atmospheric Pollution.							
Smoke and Grit Nuisances.							
Complaints of smoke and grit .. ..	..	..	..	..	..	..	9
Observations on chimneys (Sec. 1) ..	..	..	..	..	..	..	124
Meetings with engineers, architects, etc. ..	..	..	..	..	..	..	125
Visits to atmospheric pollution survey instruments	..	..	..	..	..	..	404
Miscellaneous visits .. ..	..	..	..	..	..	..	191
Notices and letters re smoke .. ..	..	..	..	..	..	..	109

Smokeless Zones and Smoke Control Areas.

The Preston (Area No. 7) Smoke Control Order, 1962 came into operation on the 1st June, 1964. The Area No. 8 Order was confirmed by the Minister on the 31st March, 1964 and became operative on the 1st October, 1964.

The No. 9 Area Order made by the Council on the 19th February, 1964 was also m ed during the year on the 2nd November.

The Health Committee decided to extend the area of smokelessness in the west of the town and on the 7th September, 1964 the Preston (Area No. 10) Smoke Control Order, 1964 was made. This covered an area bounded by Blackpool Road and Woodplumpton Road and included 175 acres and over 950 premises. Details of this area are given in the Appendix.

Two further areas were considered by the Health Committee towards the end of the year and approval was given to the making of orders covering these two areas, details of which are given in Appendix 2 of this report.

Table 61.

Visits in connection with Smokeless Zones and Smoke Control Areas.

Survey visits	2,069
Visits re grants	688
Visits re Offences	482

PRIOR APPROVAL.

Under Section 102 of the private act of 1947 prior approval to the installation of new steam raising plant was sought in 5 cases as follows :—

Installation of new oil-fired boilers	1
Conversion of solid fuel-burning boilers to oil-fired	1
Installation of gas-fired boilers	3

Approval subject to certain conditional requirements was given in all cases.

Notification of intention to install boilers was given in accordance with Section 3 of the Clean Air Act in 48 cases as follows :—

New oil-fired boilers	29
New gas-fired boilers	8
Converted from solid fuel to oil	6
Oil-fired warm air heaters	5

CHIMNEY HEIGHTS.

Applications under Section 10 of the Clean Air Act were submitted in 22 cases. In some instances the original application could not be approved and amongst the measures agreed with the applicants before approval was given were an increase in the velocity of the flue gases at chimney top height, the avoidance of condensation and smut formation, the installation of audible smoke alarms and increased chimney height.

15. Consumer Protection Act, 1961.

Heating Appliances (Fireguards) Regulations, 1953.

Fifteen visits were made by the Inspectors during the year.

In two instances warning letters were sent to dealers in respect of contraventions of the above Regulations.

16. Public Conveniences.

Four conveniences are served each by attendants. Washing facilities with hot and cold water are available together with paper towels which are free. Linen towels can be obtained at a charge of 4d.; hot-air hand driers are also provided at these conveniences.

Hot and cold water is also laid on to Garstang Road, Kendal Street, Fylde Road/Victoria Street, Adelphi Street/Moorbrook Street, Grange Park, and the Serpentine Moor Park Conveniences, and hot-air hand driers are provided. Garstang Road convenience is staffed during the summer period.

The Wharf Street urinal was closed during the year and the urinal at Steamer Hotel demolished. In the Old Cemetery the conveniences adjacent to the Catholic Church were demolished.

New incinerators were installed at Church Street and Birley Street conveniences.

Avenham Park Gents' convenience was closed for a period whilst extensive repairs were being carried out.

Ribbleton Park Ladies/Gents has been closed for several months due to extensive and repeated wilful damage.

Damage to public conveniences cost the Corporation £252.7.11 during 1964.

17. Pharmacy and Poisons Act.

In connection with the Pharmacy and Poisons Act, Part 2, registrations, 5 visits were paid to premises, mainly small mixed business shops seeking registration under the Act.

18. Hairdressers' Establishments.

Thirty-six visits were made in connection with the supervision of hygiene conditions in these establishments.

19. Fertilisers and Feedingstuffs Act, 1926.

Four samples of fertilisers and three samples of feedingstuffs were taken during the year and the results are listed in the following table :—

Table 62. Fertilisers and Feedingstuffs			
Class of Sample	No. taken	Satisfactory	Unsatisfactory
All purpose fertiliser	1	1	—
Raw bone meal	1	1	—
Dried blood	1	—	1
Liquid manure	1	1	—
Light hybrid layers crumbs.. ..	1	1	—
Intensive layers, deep litter and battery crumbs	1	1	—
X.L. Dairy Nuts	1	1	—

The unsatisfactory dried blood showed slight percentage variation of nitrogen from that stated in the statutory statement, the difference from that allowed by the limit of variation being 0.3%. The Agricultural Analyst was of the opinion that the difference was unlikely to be to the prejudice of the purchaser.

20. Rag Flock and Other Filling Materials.

At the end of the year there were eight premises registered in accordance with Section 2 of the Rag Flock and Other Filling Materials Act, 1951.

Housing

Clearance of Unfit Houses.

Further representation of unfit property included in the 1955 proposals was made during the year. The areas dealt with were around St. Paul's Road and in the angle between London Road and New Hall Lane.

Of the properties included in the original proposals only two major groups in the Ribbleton Lane/New Hall Lane area remain to be dealt with.

Clearance Areas.

The Queen Street, etc. Nos. 1 & 2 and Bluebell Place, etc. Compulsory Purchase Orders, 1963, and Mellings Fold, Stanley Street and Laikhill Road Clearance Orders, 1963, containing 541 unfit houses, of which 525 included in the Queen Street Orders were the subject of a public inquiry held in 1963, duly received ministerial confirmation with the following modifications. (a) Two houses represented as unfit were transferred to Part III of the Orders as fit houses, (b) one house represented as unfit was determined not to be a house and placed in Part III of the Order as an "other building", (c) two houses represented by reason of "bad arrangement" were determined not to be badly arranged and were transferred to Part III of the Order as fit houses, (d) ten Council owned houses, two unfit and eight fit, were excluded from the confirmed orders, (e) one fit house was excluded from the Order at the request of the Council.

Formal representations were made in respect of 860 houses within three separate groups of property lying in the vicinities of Sussex Street, St. Paul's Road and London Road. These clearance areas were contained in the following orders made in the current year and from which three unfit houses were excluded having been purchased by the Council.

PRESTON (SUSSEX STREET, ETC.) COMPULSORY PURCHASE ORDER, 1965.

Location : To the west of St. Paul's Road, bounded by Rye Street to the north, Southgate and Kent Street to the west and Essex Street to the south.

Acreage of land in order	...	...	...	5.85 acres
Acreage of "pink" property	...	...	...	5.24 acres
Housing density of unfit houses per acre	...	...	...	62.8
Number of unfit houses	...	...	...	329
Number of fit houses	...	...	...	20
Number of "other buildings"	...	...	...	4

PRESTON (ST. PAUL'S ROAD, ETC.) COMPULSORY PURCHASE ORDER, 1965.

Location : Lying to the east and west of St. Paul's Road, bounded by Meadow Street to the south and Oakley Street to the north.

Acreage of land in Order	...	...	...	5.74 acres
Acreage of "pink" property	...	...	...	3.94 acres
Housing density of unfit houses per acre	...	...	...	49.7
Number of unfit houses	...	...	...	196
Number of fit houses	...	...	...	56
Number of "other buildings"	...	...	...	6



THE OLD



THE NEW

PRESTON (DANEWERKE STREET, ETC.) CLEARANCE ORDER, 1965.
Location : Lying to the north east of St. Paul's Road near its junction with St. Paul's Square.

Acreage of land in Order	...	...	...	0.284 acre
Housing density per acre	...	...	...	56.3
Number of unfit houses in Order	...	...	...	16

PRESTON (LONDON ROAD, ETC.) COMPULSORY PURCHASE ORDER, 1965.
Location : Lying to the east of London Road near its junction with New Hall Lane.

Acreage of land in Order	...	...	...	7.24 acres
Acreage of "pink" property	...	...	...	5.96 acres
Housing density of unfit houses per acre	...	...	...	53
Number of unfit houses	...	...	...	316
Number of fit houses	...	...	...	16
Number of "other buildings"	...	...	...	7

Individual Unfit Houses.

Formal representation was made and accepted by the Council in respect of one individual unfit house under Section 16 of the 1957 Act. During the year the Council made one demolition order.

One closing order was made under Section 18 in respect of part of a building.

A closing order in respect of one house was revoked under Section 28 and substituted by a demolition order.

Six houses as a consequence of demolition orders and six Council owned unfit houses were demolished.

Three unfit houses were demolished by the owners in pursuance of a formal agreement with the Council to demolish and redevelop.

Families Displaced.

The following table gives details of the families displaced during 1964 as a result of slum clearance procedure. 20.8% of the families displaced found their own alternative accommodation.

Table 63. Families displaced during 1964.					
	Rehoused by Local Authority		Otherwise Displaced (Found own accommodation etc.)		Total
	Unfit houses	Fit houses	Unfit houses	Fit houses	All houses
Clearance Orders and Compulsory Purchase Orders	581	52	135	30	798
Individual Unfit houses ...	6	—	3	—	9
Total	587	52	138	30	807

Demolition.

A total of 484 premises comprising (a) 421 unfit houses, (b) 42 fit houses and (c) 21 other buildings were demolished during the year under review as a result of Housing Act action.

Slum Clearance Progress.

It can be seen from Tables 64 and 65 that during the last eleven years 6,133 unfit houses have been formally represented and from these 9,319 persons making up 3,270 families have been rehoused mainly in new houses possessing modern amenities. A further 849 fit houses have been included in Compulsory Purchase Orders and from these 1,492 persons making up 567 families have been rehoused.

Thus a total of 10,811 persons contained in 3,837 families have been rehoused as a result of Housing Act action taken since 1954.

At the end of 1964 there were 793 families occupying unfit houses and 163 families occupying fit houses contained within confirmed and operative orders. A further 2,013 families were occupying unfit houses and 114 families occupying fit houses within orders which were awaiting ministerial confirmation.

The number of properties demolished as a consequence of representations and orders made during the period 1954-1964 was (a) 2,573 unfit houses; (b) 506 fit houses ; and (c) 161 other buildings, a total of 3,240 properties.

Repair of unfit houses.

During the year one formal and one informal notice were served under the Housing Act, in respect of houses regarded as capable of being made fit at reasonable expense.

General repair of houses under Public Health Act procedure was also carried out and is referred to in the preceding chapter.

Improvement Grants.

Conditions of grants made under the House Purchase and Housing Act, 1959, and the Housing Act, 1964, include that after execution of the proposed works the dwelling will be in such a condition as not to be unfit for human habitation and is likely to remain in that condition for a period of not less than 15 years.

Applications for grants are made through the Borough Surveyor, but certification as to the fitness or otherwise of the houses concerned is sought from the Medical Officer of Health.

Advice was sought as to the fitness of houses in respect of 19 applications for Discretionary Grants under the 1958 Act and 176 applications for Standard Grants under the 1959 and 1964 Acts. Two houses were considered fit but unlikely to have a life of 15 years, two houses were considered to be capable of being made fit at reasonable expense but unlikely to have a life of 15 years and one house was considered to be capable of being made fit at reasonable expense with a life of over 15 years. The remainder were considered fit in terms of the grant requests.

Table 64.
Number of houses, persons and families dealt with in Clearance Areas represented
to the end of 1964.

Year of Re- presenta- tion	Number of properties included			Total number of properties									Families and Persons Displaced from houses									
													Rehoused by Council				Otherwise Displaced				Total Families Displaced	Total Persons Displaced
	Unfit Houses			Fit Houses			Other Buildings			Unfit Houses		Fit Houses		Unfit Houses		Fit Houses						
	Unfit houses	Fit houses	Other buildings	Demol- ished	Empty	Occu- pied	Demol- ished	Empty	Occu- pied	Demol- ished	Empty	Occu- pied	Fami- lies	Persons	Fami- lies	Persons	Fami- lies	Persons	Fami- lies	Persons		
1951	21 (21)	— (—)	— (—)	21	—	—	—	—	—	—	—	—	19	69	—	—	2	5	—	—	21	74
1954	169 (169)	1 (1)	11 (11)	169	—	—	1	—	—	11	—	—	164	575	—	—	12	14	1	2	177	591
1955	268 (262)	13 (13)	18 (13)	262	—	—	13	—	—	13	—	—	221	619	13	29	50	82	3	7	287	737
1956	354 (354)	44 (44)	26 (26)	354	—	—	44	—	—	26	—	—	294	934	33	111	68	169	16	45	411	1259
1957	184 (177)	14 (9)	17 (11)	177	—	—	9	—	—	11	—	—	141	393	7	19	24	44	2	6	174	462
1958	370 (363)	71 (75)	27 (27)	363	—	—	75	—	—	25	—	2	315	953	53	139	61	150	21	49	450	1291
1959	307 (307)	82 (67)	34 (34)	307	—	—	67	—	—	34	—	—	240	707	36	94	67	144	27	79	370	1024
1960	274 (269)	69 (70)	18 (17)	269	—	—	70	—	—	16	1	—	198	534	45	108	74	189	25	55	342	886
1961	486 (474)	239 (241)	33 (35)	437	37	—	222	12	7	24	2	9	374	1104	144	387	85	195	80	190	683	1876
1962	945 (913)	108 (123)	76 (75)	80	491	342	5	40	78	1	—	74	464	1392	31	92	112	230	15	32	622	1746
1963*	1683 (534)	116 (93)	72 (32)	2	81	451	—	15	78	—	—	32	71	213	11	37	10	31	4	11	96	292
1964	860	92	17	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	5921 (3843)	849 (736)	349 (281)	2441	609	793	506	67	163	161	3	117	2501	7493	373	1016	565	1253	194	476	3633	10238

Orders made during 1964 are awaiting Ministerial confirmation.

Notes : Figures shown in brackets are the number of properties in orders as confirmed after various modifications.

* From the representations of 1963 (a) four unfit and eight fit houses were not included in the confirmed orders having been purchased by the Council ; (b) two houses represented as unfit were transferred to part III of the order as fit houses ; (c) one house represented as unfit was determined not to be a house within the meaning of the Act and was transferred to part III of the order as an "other building" ; (d) two houses represented by reason of "bad arrangement" were determined not to be badly arranged and were transferred to part III of the order ; (e) one fit house was excluded from the order at the request of the Council ; (f) three houses represented as unfit were not included in the subsequent order, the owners having entered into an agreement with the Council to demolish and redevelop.

Table 65.
Number of houses, persons and families dealt with in Individual Unfit Houses during
period 1st January, 1954 to 31st December, 1964.

Type of Order, etc.	Total number of houses	Number of Houses			Families and Persons Displaced					Total Persons Displaced
					Rehoused by Council		Otherwise Displaced		Total Families Displaced	
		Demolished	Empty	Occupied	Families	Persons	Families	Persons		
* Demolition Orders	122	106	12	4	97	333	28	62	125	395
* Closing Orders	73	10	61	2	43	86	15	37	58	123
Undertakings not to use ...	8	1	7	—	5	15	1	2	6	17
* Undertakings to make fit ...	11	—	1	10	—	—	—	—	—	—
Compulsory purchase in lieu of Demolition Orders ...	2	—	—	2	—	—	—	—	—	—
** Council owned unfit houses ...	56	33	6	17	23	72	12	38	35	110
***Privately owned unfit houses ..	3	3	—	—	—	—	1	2	1	2
TOTAL	275	153	87	35	168	506	57	141	225	647

* Nine houses were subsequently made fit as a result of formal undertakings; one Closing Order was determined after execution of works to make house fit; one Demolition Order was quashed upon appeal to County Court.

** Includes thirty-nine Council-owned unfit houses properly included in Clearance Areas but excluded from subsequent Compulsory Purchase Orders.

*** Houses properly included in a Clearance Area but excluded from the subsequent Compulsory Purchase Order, the owners having entered into an agreement with the Council to demolish and redevelop.

Housing Consolidated Regulations, 1925.

The following table gives the information required under Article 31 of the above regulations.

Table 66.
Housing Act, 1957—1961.
Action taken in respect of unfit houses under the above Act.

Number of Inspections	...	...	...	...	...	...	...	2,529
Number of houses which on inspection were considered to be unfit for human habitation	...	...	...	...	...	...	...	864
Number of Representations made to the Council —								
(a) with a view to service of Notice requiring execution of works	...	...	...	...	...	...	...	1
(b) with a view to making of Demolition Orders, Closing Orders	...	...	...	...	...	...	...	1
(c) with a view to declaring Clearance Areas (Number of houses)	...	...	...	...	...	...	...	860
Number of notices served requiring execution of works —								
(a) informal	...	...	...	...	...	...	...	1
(b) formal	...	...	...	...	...	...	...	1
Number of houses rendered fit after service of —								
(a) informal notice	...	...	...	...	...	...	...	—
(b) formal notice	...	...	...	...	...	...	...	—
Number of Demolition Orders made under Section 17 of the Housing Act, 1957	...	...	...	...	...	...	...	1
Number of Closing Orders made under Section 17(1) of the Housing Act, 1957	...	...	...	...	...	...	...	—
Number of Closing Orders made under Section 18 of the Housing Act, 1957	...	...	...	...	...	...	...	1
Number of Undertakings accepted by the Council	...	...	...	...	...	...	...	—
Number of houses demolished as a result of Orders made under Section 17 of the Housing Act, 1957	...	...	...	...	...	...	...	6
Number of houses demolished as a result of Clearance Orders	...	...	...	...	...	...	...	2
Number of Council-owned unfit houses demolished	...	...	...	...	...	...	...	6
Number of privately owned unfit houses demolished	...	...	...	...	...	...	...	3
Number of houses demolished as a result of Compulsory Purchase Orders	...	...	...	...	...	...	...	446
Number of other buildings demolished as a result of Compulsory Purchase Orders	...	...	...	...	...	...	...	21

Overcrowding.

Table 67.
Overcrowding, 1964.

Number of complaints received	...	...	...	...	...	...	9
Number of complaints confirmed and referred to the Housing Committee	...	...	...	...	...	...	—
Number of complaints not confirmed	...	...	...	...	...	...	5
Number of complaints confirmed, but no action taken	...	...	...	...	...	...	1
Number of letters sent to abate overcrowding	...	...	...	...	...	...	1
Number rehoused while complaint was being investigated	...	...	...	...	...	...	2
Number rehoused by the Local Authority following reference	...	...	...	...	...	...	—

Houses in Multiple Occupation.

Formal notices requiring the carrying out of works were served under the Housing Act, 1961 in respect of three houses in multiple occupation. Notices of intention to make a management order were also served in respect of two of these premises, both of which were subsequently vacated, in one instance after a management order had been made.

Rent Act, 1957.

The Inspectors made 25 visits in connection with Certificates of Disrepair.

Table 68.
Rent Act, 1957.
Certificates of Disrepair.

Number of certificates applied for	...	...	...	...	...	6
Number of certificates granted	...	...	...	...	...	6
Number of applications withdrawn	...	...	...	...	...	—
Number of certificates refused	...	...	...	...	...	—
Number of applications for revocation	...	...	...	...	...	5
Number of objections to revocation	...	...	...	...	...	—
Number of certificates revoked	...	...	...	...	...	5
Number of revocation certificates refused	...	...	...	...	...	—
Number of applications by landlord for certificates as to remedying of defects	...	...	...	...	...	1
Number of applications by tenant for certificates as to remedying of defects	...	...	...	...	...	1
Number of certificates as to remedying of defects recommended	...	...	...	...	...	...
(a) Defects remedied	...	...	...	...	...	1
(b) Defects not remedied	...	...	...	...	...	1

Food and Drugs

Food Hygiene.

Prosecutions were successfully taken against a cafe proprietor for contraventions of the Food Hygiene Regulations 6, 14(4), 14(5), 16, 21, 23 and 24 and against a bakehouse proprietor under Section 2 of the Food and Drugs Act, 1955 for selling a meat pie containing a piece of metal. Fines of £20 and £10 with £15.15.0 costs respectively were imposed.

Premises	Number of visits
Food Hygiene	493
Food inspection	723
Dairies and milk retailers	103
Licensed premises	36
Food markets	149
	1,504

Repair or Improvement	Number
Floors repaired or renewed	7
Food preparing premises cleansed	16
Food storage provided or repaired	13
Hand washing facilities in food premises provided	8
Lighting provided	5
Passages or yard surfaces flagged, etc.	2
Plasterwork repaired or renewed	1
Roofs repaired or renewed	1
Walls repaired or renewed	4
Water service pipes repaired or renewed	1
W.C. accommodation provided, improved, repaired or renewed	5
Woodwork (general) repaired or renewed	1
Ventilation improved	5
Other work done	13

MILK.**Milk and Milk Sampling.**

Samples of milk were taken from supplies coming into the borough for sale in the raw state to determine the presence of tubercle bacilli. Table 71 shows all the samples to be satisfactory.

Table 71.			
Milk samples taken for biological examination.			
Class of milk sample	No. of samples taken	Tubercle bacilli	
		Absent	Present
Tuberculin Tested	10	10	—
T.T. (Farm bottled)	20	20	—
T.T. (Farm bottled)(Channel Island) ..	4	4	—
T.T. (Farm cartoned)	13	13	—
Totals ..	47	47	—

Table 72 shows the samples examined for brucellosis.

Table 72.							
Milk samples taken for Brucellosis.							
Class of milk sample	No. of samples taken	Ring Test		No. of samples taken	Culture or Inoculation		
		Absent	Present		Absent	Present	
Tuberculin Tested	57	51	6	12	9	3	
Tuberculin Tested	21	19	2	21	18	3	
(Farm bottled)							
Tuberculin Tested	4	4	—	4	4	—	
(Farm bottled)							
(Channel Island)							
Tuberculin Tested	13	12	1	13	13	—	
(Farm cartoned)							
Totals ..	95	86	9	50	44	6	

The three Tuberculin Tested (Farm bottled) milks which produced positive inoculation or culture results were from three producers retailing milk in the borough. One farm was situated in the adjoining Rural District and the Medical Officer was informed. As a result of his action one cow was removed from the herd and slaughtered. The other two were from producers with farms in the borough and fifty-three of the Tuberculin Tested samples submitted for ring test and six submitted for culture or inoculation tests were in connection with these herds. As a result one cow in each herd was proved positive and the farmers agreed to slaughter these animals. Follow-up samples were satisfactory.

In all other cases of positive ring tests subsequent inoculation results were negative.

Table 73 shows the number of raw milk samples taken for bacteriological examination. The results of unsatisfactory samples from known farm supplies or producer/retailers are passed to the Divisional Milk Officer of the Ministry of Agriculture, Fisheries and Food for investigation at source.

Table 73. Milk samples taken for bacteriological examination.			
Class of milk sample	No. of samples taken	Methylene Blue test	
		Passed	Failed
Tuberculin Tested	5	3	2
Tuberculin Tested (Farm bottled)	21	18	3
Tuberculin Tested (Farm cartoned)	12	11	1
Tuberculin Tested (Farm bottled) (Channel Island) ..	4	3	1
Totals ..	42	35	7

In addition twenty-seven of these samples were examined and found to be free of antibiotics.

A total of two hundred and sixty-seven samples of milk were submitted for chemical analysis. These are summarised in Table 74.

<div>Table 74.</div> <div>Milk samples taken for chemical analysis.</div>						
Class of milk sample	No. of Samples taken	Informal		Formal		
		Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory	
Tuberculin Tested	204	181	14	3	6	
Tuberculin Tested (Farm bottled)	10	4	4	2	—	
Tuberculin Tested (Farm cartoned)	2	2	—	—	—	
Tuberculin Tested (Channel Island)	14	10	2	—	2	
Pasteurised	12	8	1	3	—	
Pasteurised (Homogenised)	12	10	—	2	—	
Pasteurised (Channel Island)	6	5	1	—	—	
Sterilised	4	2	1	1	—	
Tuberculin Tested (Pasteurised)	3	3	—	—	—	
Totals ..	267	225	23	11	8	

Seven of the unsatisfactory Tuberculin Tested and four Tuberculin Tested (Channel Island) samples contained traces of extraneous water ranging from 0.3 per cent to 4.0 per cent. Three Tuberculin Tested samples taken from churns of milk received at dairies showed fat deficiencies of 3.3 per cent to 8.3 per cent, but in each instance the overall average fat content of each total consignment was in excess of the 3 per cent minimum. Warning letters were sent to producers regarding these deficiencies.

Four farm bottled milks contained small amounts of extraneous dirt and dung ranging from 0.6 to 1.1 parts per 100,000. Producer/retailers were warned and the Ministry of Agriculture, Fisheries and Food were notified for investigation on the farms. Follow up samples were satisfactory.

Two Tuberculin Tested samples contained 173 ppm and 40 ppm of sodium chlorate the equivalent of 2,000 ppm and 400 ppm of available chlorine respectively. The farmers were warned and the Ministry of Agriculture, Fisheries and Food were asked to investigate at the farms. Follow up samples were satisfactory.

Three Tuberculin Tested and one Sterilised milks contained 0.08, 0.1, 0.7 and 0.01 I.U's of penicillin respectively. The producers and the Milk Marketing Board were notified.

A bottle of Pasteurised (Channel Island) milk received from a customer contained fragments of cooked lean meat. A churn of milk delivered to a school kitchen contained fragments of heather, mycelium and fungus supported on clotted milk which had originated from an unclean churn lid. In both instances, after investigation, warning letters were sent to the dairymen.

Three Tuberculin Tested samples from one producer contained 3.0 per cent, 13.9 per cent and 14.7 per cent extraneous water. The prosecution failed due to incorrect service of the informations.

Table 75.
Milk samples taken for Phosphatase, Methylene Blue and Turbidity Tests.

Class of sample	No. of samples taken	Phosphatase		Meth. Blue		Turbidity	
		Passed	Failed	Passed	Failed	Passed	Failed
Pasteurised	75	75	—	75	—	—	—
Tuberculin Tested ..							
(Pasteurised) ..	60	60	—	60	—	—	—
Pasteurised							
(Homogenised) ..	59	59	—	59	—	—	—
Pasteurised							
(Channel Island) ..	55	55	—	54	1	—	—
Sterilised	84	—	—	—	—	84	—
Totals ..	333	249	—	248	1	84	—

Follow-up samples were taken in connection with the one methylene blue failure and were found to be satisfactory.

Forty-one of the above satisfactory samples were of school milk supplies.

Dairies and Milk Distributors.

At the end of the year there were fourteen premises registered as dairies. The owners of two of these dairies and one dairy farmer hold licences to pasteurise milk under the Milk (Special Designations) Regulations. Seven distributors of milk are also registered to operate from registered dairy premises.

Three hundred and twelve distributors are registered for the sale of bottled milk at shops. There are also approximately fourteen distributors operating from premises outside the borough and approximately twelve dairy farmers are known to be retailing milk in the borough.

The two pasteurising plants situated in dairies are of the "High temperature short time" type, whilst one "Holder" type plant is situated at a dairy farm.

Miscellaneous Samples.

Two hundred and seventy-four samples were submitted for bacteriological examination and one hundred and seventy-four for chemical analysis. These are summarised in the four subsequent tables.

Table 76.			
Miscellaneous samples taken for bacteriological examination			
Class of Sample	Number of Samples taken	Satisfactory	Unsatisfactory
Milk bottle rinses	65	60	5
Churn rinses	12	12	—
Corned beef	3	2	1
Well water	82	58	24
Town's water	19	13	6
Swimming baths water	5	5	—
Milk powder	2	2	—
Meat pies	1	1	—
Swabs from kitchen equipment ..	10	5	5
Double cream	2	—	2
Cream	9	6	3
Butter	2	2	—
Totals ..	212	166	46

The wellwater samples were from a deep well supplying water exclusively for dairy use. Coliform Bacilli was present in the unsatisfactory samples and efficient chlorination of this supply has now been introduced.

Ice Cream.

At the end of the year there were ten registered manufacturers of ice cream in the borough.

The unsatisfactory bacteriological results were from one manufacturer and taken during investigations. Satisfactory results were eventually obtained from this source.

Table 77. Ice Cream and Ice Lolly samples taken for bacteriological examination					
Class of sample	No. of samples	Methylene Blue		P.H. Value	
		Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory
Dairy Ice Cream	3	3	—	—	—
Ice Cream	33	22	11	—	—
Ice Cream Mix	18	12	6	—	—
Choc-Ice Cream	1	1	—	—	—
Ice Cream Lollipops	2	—	—	2	—
Ice Lollies	5	—	—	5	—
Totals ..	62	38	17	7	—

Table 78 Ice Cream samples taken for chemical analysis			
Class of Sample	No. of samples taken	Satisfactory	Unsatisfactory
Ice Cream	3	3	—

Table 79.
Miscellaneous samples taken for chemical analysis.

Class of Sample	Number of Samples taken	Satisfactory	Unsatisfactory
Miscellaneous foods	25	25	—
Fresh fruits	6	6	—
Tinned fish	3	3	—
Tinned cream	3	3	—
Tinned meats	8	7	1
Tinned peas	2	2	—
Tinned fruit	1	1	—
Fats including margarine	19	18	1
Dried fruits	5	5	—
Other dehydrated foods	9	8	1
Sweets and sugar confectionery ..	13	13	—
Preserves and jellies	7	7	—
Minced meat	5	5	—
Tomato sausages	1	1	—
Beef sausages	2	—	2
Pork sausages	1	—	1
Pickles and sauces	6	6	—
Bacon	2	2	—
Wines and wine cocktails	6	6	—
Cheese spread	3	3	—
Fruit drinks	10	10	—
Cereals	2	2	—
Bread	4	3	1
Part fowl leg	1	1	—
Coffee and beverages	4	4	—
Cakes	7	7	—
Fish and fish cakes	3	3	—
Potted salmon	1	—	1
Salmon paste	1	—	1
Potted meat	1	—	1
Fresh and double cream	5	5	—
Vinegar	2	1	1
Part hamburger	1	—	1
Totals	169	157	12

In addition, two insects were submitted for identification in connection with food complaints.

Details of Unsatisfactory Samples.

Tinned steak in rich gravy (produce of the Republic of Ireland) contained only 69 per cent meat. A recommended minimum was 75 per cent. The importers were informed.

Margarine contained 16.1 per cent moisture. The packers were informed.

Dehydrated Mushroom Soup contained only the fungus *Boletus Edulis* while the packet was decorated only with illustrations of the common mushroom, *Agaricus Campestris*. The packers agreed to amend the contents to contain a minimum of 60 per cent *Agaricus Campestris*.

Two beef sausage samples contained 210 and 320 parts per million sulphite preservative expressed as sulphur dioxide without declaration. The vendors were warned and correct notices are now displayed in the shops.

Pork sausages contained only 61.5 per cent meat and 220 parts per million sulphite preservatives expressed as sulphur dioxide without declaration. The producer/vendor agreed to amend his recipe to include a minimum 65 per cent meat content and the correct notice regarding preservatives is now displayed in the shop.

A loaf contained 0.21 grms. of jute fibre discoloured with carbonised starch—probably string from an oven cloth or flour bag. A warning letter was sent to the producer.

Potted salmon contained only 44 per cent fish. The follow-up sample taken was sold as Salmon Paste and this contained 46.5 per cent fish and was therefore deficient 33.5 per cent fish. The retailer possessed a valid warranty so proceedings were taken under the Food Standards (General Provisions) Order, 1944 and the Fish Paste (Food Standards) Order 1951 against the manufacturer who was fined £20.

Potted meat contained 73.5 per cent meat with added water and gelatine. The vendor agreed to describe this product as a pressed beef.

Malt vinegar was cloudy and contained 3 mgms. of debris consisting of paper pulp, parts of mites and bacteria, probably derived from filter material. The packers were informed and remaining stocks were withdrawn.

As a result of a complaint received a piece of foreign matter submitted with a part hamburger was found to be 0.26 gms. of used chewing gum. None was present in the part hamburger. After investigation a warning letter was sent to the vendors.

The Liquid Egg (Pasteurisation) Regulations 1963.

There are no pasteurising plants within the area.

Retail and Wholesale Markets.

One hundred and forty-nine visits and inspections were carried out during the year.

MEAT.

Visits associated with the control and inspection of meat and meat handling were made as under :—

Table 80.						
Visits made by Veterinary Officer and Meat Inspectors.						
					Veterinary Officer	Meat Inspectors
Visits to public slaughterhouses	..	..	..	..	435	384
Visits to private slaughterhouses	..	..	..	..	250	308

Slaughter of Animals Act, 1958.

The number of licensed slaughtermen at the year end was 34. No action has been necessary under the Act.

Public Abattoir.

Table 81. Number of animals killed and inspected.				
Year	Cattle	Sheep	Pigs	Calves
1964	7,168	32,194	8,709	53
1963	8,384	34,704	7,331	85
1962	8,898	37,524	7,296	100
1961	8,741	42,894	4,265	122

Table 82. Casualties (included in figures in Table 81).				
Year	Cattle	Sheep	Pigs	Calves
1964	26	96	100	18
1963	31	41	120	13
1962	42	29	115	8
1961	65	90	162	31

On 1st October 1964 the new municipal abattoir was opened. A big improvement in conditions of slaughter and handling has been apparent. Some minor difficulties were encountered in the early stages after opening the new building, but some teething problems were inevitable. Most of these problems had been overcome by the year end and work has proceeded smoothly. The full benefit of the new building will not develop immediately, as experience in its use, and possibly increased kill, will be required to operate the building at maximum efficiency.

Private Slaughterhouses.

One private slaughterhouse is licensed in the Borough and has operated satisfactorily during the year.

Table 83. Number of animals killed and inspected				
Year	Cattle	Sheep	Pigs	Calves
1964	6,630	16,004	5,776	3
1963	7,971	16,604	2,313	5
1962	3,741	14,407	435	—
1961	—	—	81	—

Table 84.
Carcases and Offal inspected and condemned in whole or in part.

	Total Cattle	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	13,798	7,238*	6,560*	56	48,198	14,485	—
Number inspected	13,798	—	—	56	48,198	14,485	—
ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCOSIS							
Whole carcases condemned	—	19	29	12	98	115	—
Carcases of which some part or organ was condemned	—	2,306	2,095	2	3,570	1,460	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	—	31.9	31.8	25.0	7.0	10.0	—
TUBERCULOSIS ONLY							
Whole carcases condemned	—	2	—	—	—	—	—
Carcases of which some part or organ was condemned	—	10	39	—	—	65	—
Percentage of the number inspected affected with tuberculosis	—	.01	.05	—	—	.4	—
CYSTICERCOSIS							
Carcases of which some part or organ was condemned	—	20	11	—	—	—	—
Carcases submitted to treatment by refrigera- tion	—	20	11	—	—	—	—
Generalised and totally condemned	—	—	—	—	—	—	—

*Estimated Figures

Meat Marking.

This has continued as required by the Meat Inspection Regulations 1963. Inspection has proceeded in a satisfactory manner and meat traders have been fully co-operative with the meat inspection staff.

Meat coming into the Borough from other areas.

As meat inspection is compulsory it is understood that meat from other areas arriving in Preston will be fit for consumption and no routine checks are made on it. Examinations are made of this meat whenever possible to ensure that no deterioration has occurred through transport or storage.

Public Health (Meat) Regulations.

The general state of meat handling is daily supervised. The "Appointed Day" in Preston was 1st October 1964 under the Slaughterhouses Act 1958 and on this date the remainder of the Slaughterhouses (Hygiene) Regulations, including the parts concerned with the construction of slaughterhouses, came into force.

DISEASES OF ANIMALS ACTS AND ORDERS.**Anthrax Order, 1938.**

There has been no case of anthrax in the Borough during the year. Several suspect cases have proved negative on examination.

Foot and Mouth Disease Order, 1938.

As there has been no case of Foot and Mouth disease in this country for two years there is nothing to report.

Diseases of Animals (Waste Foods) Order, 1957.

Periodic inspections are made of the few remaining users of swill for animal feeding but there has been no cause for complaint.

Sheep Scab Order, 1938.

As sheep scab has been eradicated from the country there is nothing to report under this Order.

Swine Fever Order, 1938.

No outbreaks of this disease have occurred in the Borough during the year but owing to outbreaks in the vicinity standstill restrictions were imposed for nearly a month in September-October. These cancelled the sales of store pigs at the market during this period. No offences under the Order were detected. The compulsory slaughter of swine in confirmed outbreaks of this disease appears to have reduced the national incidence considerably.

Movement of Swine Orders, 1954-1958.

A total of 64,284 pigs passed through the cattle market during the year and 4,544 licences were issued for their removal. No offences against this Order were detected.

Warble Fly Order, 1948.

There is nothing to report under this Order. This Order was revoked on 25th July, 1964.

Tuberculosis Order, 1938.

Although bovine tuberculosis is officially eradicated, occasional reactors to Ministry of Agriculture tests are slaughtered at the abattoir. In many cases no visible lesions of tuberculosis are found.

Markets Sales and Lairs Order, 1925.

Routine cleansing of the market has been carried on during the year and no incidents have occurred under this Order.

Transit of Animals Orders, 1927-47.

No serious offences under this Order have occurred but numerous offenders have received verbal cautions for minor infringements. The chief cause for complaint is in respect of animals whose condition is such that direct transport to the abattoir for slaughter would be more humane than exposure in the sale ring for probable slaughter elsewhere, this involving further journeys. Under these circumstances the Order has been invoked to compel 2 cows, 1 bullock, 4 pigs and 2 calves to be slaughtered at the abattoir.

Number of vehicles cleansed and disinfected	...	...	2,288
Number of vehicles inspected...	...	...	50

Importation of Dogs and Cats Order, 1938.

There is nothing to report under this Order.

Transit of Horses Order, 1951.

There is nothing to report under this Order.

Animals (Landing from Ireland, Channel Islands and Isle of Man) Order, 1933.

Four thousand two hundred and sixty-nine Irish cattle passed through the market during the year, 1,584 went directly to the public abattoir, 146 were licensed to farm premises for later movement to the public abattoir and 2,539 animals were sold in the market and licensed to farm premises. In all 217 licences for movement were issued.

Fowl Pest Orders, 1936-1954.

One premises in Preston was placed under restrictions during the year on account of an outbreak of Fowl Pest there. Until movement restrictions were removed licences were issued for the movement for immediate slaughter of 3,817 birds.

Poultry (Exposure for Sale) Order, 1937.

No poultry sales have been held in the Borough during the year.

Protection of Animals Acts, 1911-1912.

The cattle market is regularly patrolled to prevent any infringement of the above Acts. General standards of handling animals are satisfactory only verbal cautions being required to deal with minor offences.

Table 85.						
Details of markets held.						

Table 86. Animals passing through market.							
				1964	1963	1962	1961
Store and Dairy Cattle	...	...	...	6,745	6,106	8,467	7,679
Fat Cattle	...	...	...	22,806	23,375	23,083	20,257
Sheep	...	...	...	51,456	49,583	50,172	45,780
Calves	...	...	...	19,439	20,765	19,420	17,317
Fat Pigs	...	...	...	26,294	28,312	30,019	31,730
Store Pigs	...	...	...	32,380	—	21,415	19,771
Horses	...	...	...	155	127	184	221

Port Health Administration.

Port Health District.

The Port Health District of Preston includes the area within a line drawn from Formby Point direct to Nelson Buoy ; thence to Lune Gas Boat ; thence to the Danger Patch ; thence to King Scar Beacon and thence in a southerly direction till it meets the coast at Rossall Land Mark.

The dock, which is 3,200 feet long by 600 feet wide, covers 40 acres and is approached by the entrance basin 850 feet long by 300 feet wide, an area of $4\frac{3}{4}$ acres.

The communicating locks are 550 feet long and 66 feet wide, with a depth of 29ft. 6ins. at high water ordinary spring tide. The dock is situated within the county borough and is about $16\frac{1}{2}$ miles along the River Ribble from the sea.

The quays are over $1\frac{1}{2}$ miles long. There are 170 acres of storage ground and 590,000 square feet of covered floor space.

Section I—Staff.

The Port Medical Officer, his Deputy, two Assistant Medical Officers and the Port Health Inspector are available for the visiting of shipping using the port.

Staffing difficulties were again experienced during the year but the appointment of the Port Health Inspector, which had been vacant since April 1963, was filled in September. The applicant, a member of the staff of the Health Department, had had considerable previous experience as Deputy Port Health Inspector. In the intervening period additional staff were trained to cover the requirements.

Table 87. Staff				
Name of Officer	Nature of Appointment	Date of Appointment	Qualifications	Any other appointment held
J.S.G. Burnett ..	Port Medical Officer	1.2.49	M.D., D.P.H.	Medical Officer of Health
I.G.P. Fraser ..	Deputy Port Medical Officer	10.6.63	M.B., Ch.B., D.P.H.	Deputy Medical Officer of Health
F. Yates	Port Health Inspector	1.9.64	Cert. R.S.I. Cert. Meat and Food	District Public Health Inspector
J.H. Pendlebury ..	Deputy Port Health Inspector	21.8.62	Cert. P.H.I.E.B.	District Public Health Inspector

ADDRESS AND TELEPHONE NUMBER OF THE MEDICAL OFFICER OF HEALTH :
Health Department, Municipal Building, Preston.
Telephone No.—Preston 54881.

PRIVATE ADDRESS :
Brook House, 252 Garstang Road, Fulwood, Preston.
Telephone No.—Preston 77784.

Co-operation from H.M. Immigration Officers, The Trinity House Pilots, H.M. Customs Officers, the officials and staff of the Ribble Navigation and Preston Dock undertaking, the shipping agents and others who have been contacted about various matters, has assisted in the smooth working of the Authority's services.

Section II—Amount of Shipping entering the district during the year.

Table 88. Ships entering the district during the year.					
Ships from	Number	Tonnage	Number inspected		Number of ships reported as having or having had during the voyage infectious disease on board
			By the Medical Officer of Health	By the Public Health Inspectors	
Foreign ports ...	472	326,615	32	472	—
Coastwise	2,593	1,395,027	—	151	—
Total ...	3,065	1,721,642	32	623	—

Section III—Character of Shipping and Trade during the year.

Table 89.

Character of Shipping and Trade during the year.

Passenger Traffic	Number of passengers INWARDS...				...	...	7,568
	Number of passengers OUTWARDS				...	...	7,849
Passengers to and from :—					Foreign ports		Irish Ferry service
Passengers in:—							
Alien				...	...	11	} 7,388
British				...	...	169	
Passengers out:—							
Alien				...	...	12	} 7,759
British				...	...	78	

Cargo Traffic.**Principal Imports.**

Animal feeding stuffs, asphalt rock, bacon, bananas, bitumen, bones, canned goods, china clay, citrus fruits, cloth goods, coconuts, confectionery, eggs, fertiliser, fish, flour, fuel oils, grain, hardboard, hides, lard, maize, meat, milk, milk products, petroleum, potatoes, poultry, potash, scrap iron, shell grit, starch, stone, sulphur, timber, wood pulp.

Principal Exports.

Barbed wire, canned goods, cloth goods, coal, coke, cotton, fruit, fuel oils, furniture, iron and steel, machinery, pitch, radio equipment, salt cake, scrap iron, tar, vehicles.

Total imports	1962	1,146,570 tons.
Total exports	1962	690,758 tons.
Total imports	1963	1,197,002 tons.
Total exports	1963	764,388 tons.
Total imports	1964	1,353,304 tons.
Total exports	1964	805,126 tons.

Principal ports from which ships arrive—Foreign

North Africa :	Kenitra.
North America :	Hanlsford, Long View, New Richmond, New York Parrsboro N.S., Quebec, St. John, N.B., Vancouver, Weymouth, N.S., Windsor, N.S.
Antilles :	Grenada, Kingstown, Port Castries, Port of Spain, Portsmouth, Roseau, St. George, St. Vincent, Vieux Fort.
Cyprus :	Famagusta.
Denmark :	Copenhagen, Frederiksund, Koge.
Finland :	Helsingfors, Jacobstad, Kemi, Kotka, Mantyluoto, Oulo, Pori, Rauma, Topilla, Turku, Vasa, Yxpilia.
France :	Bayonne, Blaye, Bordeaux, Brest, Cette, Dieppe, La Pallice, Le Treport, Lorient, Nantes, St. Nazaire.
Germany :	Bremen, Hamburg, Wismar.
Greece :	Kymassi.
Holland :	Amsterdam, Delfzyl, Groningen, Rotterdam.
Italy :	Ravenna.
Norway :	Aalesund, Arendal, Bergen, Drammen, Fredrikstad, Haugesund, Kragero, Kristiansund, N., Larvick, Lousnes, Mo-i-Rana, Namsos, Narvick, Oplo, Oslo, Porsgrunn, Skien, Stavanger, Tofte, Tredestrand, Tromso, Trond- heim.
Poland :	Gdansk, Gdynia, Stettin.
Portugal :	Lexioes.
Roumania :	Constanza.
Spain :	Aviles, Bilbao, Burriana, Gandia, Malaja.
Sweden :	Domsjo, Gefle, Gothenburg, Halmstad, Helsingborg, Hernosand, Hudiksvall, Karlsborg, Karlshamm, Karlstad, Malmo, Norrkoping, Oskarshamm, Pitea, Sundsvall, Westervick.
U.S.S.R.	Archangel, Igarka, Kaliningrad, Leningrad, Murmansk, Onega, Tallin.
British Isles :	Belfast, Cork, Coryton, Drogheda, Dublin, Dundalk, Fawley, Fowey, Greenore, Heysham, Larne, Liverpool, Londonderry, Manchester, Milford Haven, Par, Pen- maenmawr, Plymouth, Portrush, Ramsey, Swansea, Waterford,

There were further increases in sailings to Ireland and 1964 exceeded expectations in that again it was a record year for the tonnage of cargo handled.

There was little change in cargoes arriving in the port.

Section IV—Inland Barge Traffic.

There is no inland barge traffic from or to the Port of Preston.

Section V—Water Supply.

1. SOURCE OF SUPPLY FOR—

(a) *The District.*

The district derives its water from the Preston and District Water Board, and this is an upland surface water derived from the gathering grounds in the Forest of Bowland. The water is of good quality, well suited for drinking and domestic purposes.

(b) *Shipping.*

Shipping is supplied with water from the district supply by means of a hose from a shore hydrant.

2. REPORTS OF TESTS FOR CONTAMINATION.

Routine samples of drinking water are taken from ships using the Port and the Port Authority's own vessels and otherwise when necessary.

Table 90. Water Samples.				
From	Type	Number	Results	
			Satisfactory	Unsatisfactory
Foreign Vessels ..	Bacteriological ..	6	5	1
Coastwise Vessels ..	Bacteriological ..	4	4	—
Port Authority Vessels ..	Bacteriological ..	12	11	1
Totals		22	20	2

No samples were taken for chemical analysis during the year.

The failure of a sample on a Port Authority vessel occurred during transference of drinking water while the ships were at anchorage in the river estuary. The possibility was that the pipes used had been previously used for other purposes.

On the whole the above figures still show a good state of drinking water particularly in shipping trading regularly around the coast of Britain.

3. The supply of water to shipping is under the direct control of the Port Authority who employ a special staff for this purpose. All precautions necessary to prevent contamination of hoses and hydrants are taken.

4. There are no water boats in the Port of Preston.

Section VI—Public Health (Ships) Regulations, 1952.

1. LIST OF INFECTED AREAS.

The list of infected areas is prepared from, and amended as necessary, with details obtained from the World Health Organisation in the Weekly Epidemiological Record and is drawn up in the form of the list supplied. Copies of the list are supplied to the Trinity House Pilotage Office, Preston, and H.M. Waterguard Office, Preston

2. RADIO MESSAGES.

Preston is not a radio transmitting or receiving port.

3. NOTIFICATION OTHERWISE THAN BY RADIO.

The Port Medical Officer is notified by telephone of any untoward circumstances on board an incoming vessel after such details have been passed to the Port Authority's barge at Lytham.

Cases of sickness are dealt with by the Boarding Medical Officer.

4. MOORING STATIONS.

By agreement with the Port Authority arrangements exist for the breasting off of any ship at the discharging berths allocated, where such action is considered necessary by the Port Medical Officer. This is done by placing one of the barges of about 20 feet beam which are always available between the vessel and the quay, whilst the vessel is subjected to the prescribed measures.

This arrangement obviates the necessity of moving the vessel from one berth to another and facilitates the discharge of her cargo whether during or when freed from control.

5. ARRANGEMENTS FOR—

(a) Hospital accommodation for infectious diseases.

All cases of infectious disease other than smallpox are removed to Deepdale Hospital, Blackpool Road, Preston.

(b) Surveillance and follow-up of contacts.

Surveillance is carried out as suggested in Section 18(2) and Section 37 of the Public Health (Ships) Regulations, 1952.

(c) Cleansing and Disinfection of ships, persons, clothing and other articles.

The cleansing and disinfection of ships is carried out under the supervision of the Port Health Inspector. Clothing, bedding, etc. are removed in the Health Department's disinfection vehicles to the disinfection plant at Deepdale Hospital for steam disinfection.

Arrangements can also be made for persons to be cleansed and disinfested at the new Greenbank Clinic and bedding, etc. in the steam disinfestor at Deepdale Road depot.

Section VII—Smallpox.

(1) The reception of smallpox cases into hospital is in the hands of the Regional Hospital Board who advise as to which hospital is available for such purpose. Normally, Ainsworth Hospital, Bury, is retained as the first regional hospital to admit cases of smallpox.

(2) Smallpox cases would be removed by ambulance belonging to Preston Corporation. The vaccinal state of the crews of these ambulances is the responsibility of the Medical Officer of Health of the County Borough of Preston.

(3) SMALLPOX CONSULTANTS :

Dr. C. Metcalfe Brown, Town Hall, Manchester.
Manchester Central 3377 and Ringway 4273 (Home).

Dr. D. C. Liddle, Monsall Isolation Hospital,
Newton Heath, Manchester, 10.
Collyhurst 2254 and Collyhurst 1944 (Home).

Dr. E. R. Peirce, 8 Grosvenor Road, Cressington Park, Liverpool, 19.
Garston 1236.

Professor A. B. Semple, Health Department, Hatton Garden,
Liverpool, 3.
Liverpool Central 8433 and Gateacre 2081 (Home).

(4) Facilities for the laboratory diagnosis of smallpox are available at the Department of Bacteriology, University of Liverpool, under the direction of Professor Downie.

A request for vaccination was received in the early part of the year from the Master of a vessel in the dock in which several of the crew's international vaccination certificates had lapsed. Vaccination was carried out by the Port medical staff.

Section VIII—Venereal Disease.

Leaflets giving the undermentioned information as to location, days and hours of available facilities are distributed by the inspectors when vessels are visited :—

The Venereal Disease Clinic at the Preston Royal Infirmary is open at the following times :

Tuesday	...	...	5 p.m.—7 p.m.	Women.
Wednesday	...	...	5 p.m.—7 p.m.	Men.
Thursday	...	...	2 p.m.—4 p.m.	Women.
Friday	...	...	5 p.m.—7 p.m.	Men.

Male patients from ships likely to sail before the next male clinic can also be seen on Tuesdays or Thursdays.

61 seamen attended for treatment at the clinic for the first time during the year.

Section IX—Cases of notifiable and other infectious diseases on ships.

Table 91. Cases of notifiable and other infectious diseases on ships.				
Category	Disease	Number of cases during the year		Number of Ships concerned
		Passengers	Crew	
Cases landed from ships from foreign ports	Nil	Nil	Nil	Nil
Cases which have occurred on ships from foreign ports but have been disposed of before arrival ...	Nil	Nil	Nil	Nil
Cases landed from other ships ...	Nil	Nil	Nil	Nil

No case or suspected case of smallpox, cholera, plague, yellow fever, typhus or relapsing fever occurred during the year.

Section X—Observations on the occurrence of malaria in ships.

No case of malaria occurred during the year.

Section XI—Measures taken against ships with or suspected for plague.

No ship infected with or suspected of carrying plague arrived during the year. In the event of such an occurrence, action in accordance with the measures outlined in Part 1 of the Fourth Schedule Public Health (Ships) Regulations, 1952, would be pursued.

Section XII—Measures against rodents in ships from foreign ports.**(1) PROCEDURE FOR INSPECTION OF SHIPS FOR RATS.**

All foreign-going vessels are inspected in the following sequence.

- (a) Vessels from infected ports.
- (b) Vessels from non-infected ports.
- (c) Foreign-going vessels that have arrived from another port in the British Isles.

A rodent operator sets traps on vessels where evidence of rats is found and revisits these and other vessels from foreign ports while cargo is being discharged.

(2) ARRANGEMENTS FOR THE BACTERIOLOGICAL OR PATHOLOGICAL EXAMINATION OF RODENTS, WITH SPECIAL REFERENCE TO RODENT PLAGUE.

Rodents caught are placed in muslin bags, dipped in paraffin, labelled and despatched to the Public Health Laboratory, Preston.

One rat was sent for examination during the year with negative results.

(3) ARRANGEMENTS IN THE DISTRICT FOR DERATTING SHIPS.

The deratting of vessels prior to the issue of Deratting Certificates may be effected with hydrogen cyanide or sodium fluoroacetate.

(4) PROGRESS IN THE RAT-PROOFING OF SHIPS.

Rat-proofing was found in good condition on vessels inspected and no repairs or improvements were required.

Table 92.
Rodents destroyed during the year in ships from foreign ports.

Category										Number
Black rats	...	...	...	...	...	...	...	...	...	2
Brown rats	...	...	...	...	...	...	...	...	...	—
Species not known	...	...	...	...	...	...	...	...	...	—
Rats sent for examination	...	...	...	...	...	...	...	...	...	1
Rats infected with plague	...	...	...	...	...	...	...	...	...	—
Mice	...	...	...	...	...	...	...	...	...	—

Table 93.
Deratting Certificates and Deratting Exemption Certificates issued during the year for ships from foreign ports.

No. of Deratting Certificates issued.					Number of Deratting Exemption Certificates issued. 6	Total Certificates issued 7
After fumigation with		After trapping 3	After poisoning 4	Total 5		
H.C.N. 1	Other fumigant 2					
—	—	—	—	—	73	73

Permanent baiting of the banana boats has again kept the number of rodents found on board at a very low level. This coupled with the rat-proofing generally being of a fairly high standard in shipping using the port led to the issue of 73 exemption certificates.

The rodent operators keep a regular check on the dock estate in addition to shipping for all types of vermin. During the year 33 rats and 21 mice were accounted for both by poisoning and the use of traps. No case of infestation by the black ship rat was found on the dock estate.

Table 94.
Inspections of Ships for Nuisances.

Nature and Number of Inspections	Notices served		Defects Remedied
	Statutory Notices	Other Notices	
Total number of ships inspected ... 623			
The following defects were found :—			
Vermin 7	—	34	3
Heat, light and ventilation 1	—		—
Washplaces and fittings defective ... 2	—		—
Drainage defective 1	—		—
Sanitary accommodation defective ... 2	—		—
Food stores, preparation places and fittings defective and dirty ... 6	—		2
Drinking water system defective ... 6	—		5
Refuse accumulations... .. 1	—		—
Smoke emissions 6	—		4
Miscellaneous nuisances 2	—		1
Total 34	—	34	15

There are very few remaining hand-fired coal-burning ships trading with the port and the problem of smoke emissions is expected to disappear within the next few years.

The defects listed as not remedied were all on vessels which had left the port before completion of the work and so could not be inspected.

Section XIV—Public Health (Shell-Fish) Regulations, 1934-1948.

Mussel gathering is controlled by the Preston (Shell-Fish) Regulations, 1923. The estuary is still grossly polluted by sewage.

One sample of mussels was obtained from the beach below high water off the coast at Lytham. There are several areas where mussels are still growing but these were found to be polluted with oil. The one sample submitted for bacteriological examination was unsatisfactory.

No samples of cockles were taken during the year.

Section XV—Medical Inspection of Aliens.

The Port Medical Officer, his Deputy, and two Assistant Medical Officers are appointed Medical Inspectors for the Aliens Order, 1953 and the Commonwealth Immigration Act, 1962.

Five persons were medically examined after requests by the Immigration Officer, and all were allowed to land. One passenger had travelled for the purpose of receiving medical treatment but was considered to have sufficient money to pay for private treatment.

Section XVI—Miscellaneous.

ARRANGEMENTS FOR THE BURIAL ON SHORE OF PERSONS WHO HAVE DIED ON BOARD SHIP FROM INFECTIOUS DISEASE.

Arrangements for the interment of a deceased member of the crew of any vessel is the concern of the shipping agent and the following procedure would be adopted in the event of a death from infectious disease. The Superintendent of Mercantile Marine acting for the Ministry of Transport would be notified immediately. The body would be removed by the Health Department staff to the mortuary of the Deepdale Hospital, Preston for the purpose of local enquiry and verification of the cause of death.

LEGISLATION.

Clean Air Act, 1956 and Permitted Periods (Vessels) Regulations, 1958.
 Dangerous Drugs Regulations, 1953.
 Prevention of Damage by Pests Act, 1951 and Orders, 1951 and 1956.
 Public Health Act, 1936 and 1961.
 Public Health (Ships) Regulations, 1952, 1954, 1961 and 1963.
 Food and Drugs Act, 1955.
 Antioxidant in Food Regulations, 1958.
 Arsenic in Food Regulations, 1959 and 1960.
 Colouring Matter in Food Regulations, 1957.
 Fluorine in Food Regulations, 1957.
 Food Hygiene (General) Regulations, 1960.
 Lead in Food Regulations, 1961.
 Liquid Egg (Pasteurisation) Regulations, 1963.
 Meat Inspection Regulations, 1963.
 Public Health (Imported Milk) Regulations, 1926.
 Public Health (Imported Food) Regulations, 1937 and 1948.
 Preston (Shellfish) Regulations, 1923.
 Public Health (Shellfish) Regulations, 1936 and 1938.

Meat (Staining and Sterilisation) Regulations, 1960.

Meat (Treatment) Regulations, 1964.

Merchandise Marks Act, 1962 and Orders.

Preservatives in Foods Regulations, 1962.

Soft Drinks Regulations, 1963.

Mineral Hydrocarbons in Food Regulations, 1964.

Imported food consisted mainly of the following types :—

Apples, bacon, bananas, blackberries, canned meats, canned milks and creams, canned fruits and fishes, cheese, chocolate, citrus fruits, coconuts, confectionery, eggs, frozen fish and shellfish, frozen milk, herrings, ice cream powder, lard, meat, milk powder, potatoes, poultry, sausage.

Twenty-eight samples of food were taken during the year. Seven samples were forwarded to the Public Analyst with the following results :—

<i>Type of Food</i>					<i>From</i>		<i>Result</i>
Limes ...	...	...	...	...	West Indies	...	Satisfactory
Strawberry Jam	...	...	...	...	Ireland	...	Satisfactory
Bananas	...	...	...	...	West Indies	...	Satisfactory
Full cream powdered milk	...	...	...	...	Ireland	...	Satisfactory
Flo-mix	...	...	...	...	Ireland	...	Satisfactory
Grapefruits	...	...	...	...	West Indies	...	Satisfactory
Tinned sterilised milk	...	...	...	...	Ireland	...	Unsatisfactory

Twenty-one samples were forwarded to the Public Health Laboratory for bacteriological examination.

Satisfactory results were obtained from the following :—

1 sample of tinned apricots.

1 sample of full cream dried milk powder.

10 samples of frozen hen egg.

Samples which failed were :—

1 sample of tinned cream.

1 sample of mussels.

Specimens from five consignments of frozen liquid egg failed the alpha-amylase test for pasteurisation. By the time the laboratory reports were available the consignments were already in transit, and the information was forwarded to the Medical Officer of Health responsible for the places of destination.

The following unsound foodstuffs were voluntarily surrendered :—

					T.	Cwts.	Qrs.	Lbs.
Bananas ...	...	...	...	...	56	—	3	—
Tinned milk	...	...	...	...	—	10	1	17
Dried milk	...	...	...	...	—	—	1	26
Lard	...	...	...	...	—	—	1	12
Tinned apricots...	...	...	...	...	—	7	2	14
Total					56	19	2	13

No infringement of the Public Health (Imported) Food Regulations regarding Official Certificates occurred.

The volume of trade in container services again increased and 1964 was a record year in nett tonnage of cargo handled. Further improvements were carried out to facilitate loading and discharging and this led to a speedier turn round of vessels using the port. Regular visits are paid to check on consignments of food, but it was not necessary to detain any during the year.

One new service with Ireland was commenced during the year utilising containers.

Sanitary accommodation for dockers has long been a problem on the dock estate. It is proposed during the coming year to construct several new blocks of sanitary accommodation to replace the old, dilapidated cast iron trough closets and urinals.

The problem of the concrete block compounds for the reception of ships' refuse is at present under review. A possible solution is to do away with these compounds and replace them with steel containers of 2-3 cu. yd. capacity.

During the latter part of the year a survey was carried out on the dock estate to ascertain the extent of the smoke problem from industrial and commercial premises. The district surrounding the dock estate is either already smokeless or will shortly come under smoke control orders. The dock estate itself creates a problem due to the use of mobile steam cranes and shunting locomotives burning coal of an unsuitable nature. However, co-operation by the dock management has reduced the amount of smoke appreciably and it is hoped that the replacement of these mobile furnaces is imminent.

Welfare Services

Residential and Domiciliary Welfare Services for Aged and Handicapped Persons.

These services, carried out under the provisions of the National Assistance Act 1948, are administered through a Sub-Committee of the parent Health Committee, and take the following form :—

RESIDENTIAL ACCOMMODATION.

Residential accommodation, designed to offer as near as possible a home life and home atmosphere for the aged and infirm needing care and attention, is provided in four Corporation Hostels as follows—

Fulwood Civic Hostel	...	...	...	303 places
Ashton House	...	...	...	44 places
Sunny Bank	...	...	...	17 places
Wilson House	...	...	...	38 places

In addition aged and infirm persons and younger handicapped persons with special needs are accommodated in flats lying adjacent to Wilson House Hostel. There are 34 such flats, each of which will accommodate two persons.

The hostels and flats are ideally situated, providing easy access to main roads, bus routes, shops, churches and taverns, and the hostels offer a full range of services for the benefit and well being of the residents. These include chiropody, handicrafts, television, library, radio, boot and shoe repairing, tailoring and for the ladies' hair styling.

Throughout the year all accommodation, with the exception of that available for men at the Civic Hostel, Fulwood, has been fully occupied. Small hostel accommodation is very much in demand and consequently it was not possible to meet all requests. Thus, at year end the needs of 15 persons had not been met. They do not mind waiting however, as their needs are not too urgent and would rather wait for a vacancy in a home of their own choice.

It has been rather a difficult year for the placement of women in the Civic Hostel, Fulwood and this, despite the fact that seven additional places have been provided. At the end of the year, therefore, 20 women were awaiting admission.

Throughout the year 155 persons were admitted to all the hostels, 100 were from their own homes, 22 re-admissions after periods of hospital treatment, 25 direct from hospital, two from other hostels and six were persons who had no fixed abode. There were 11 transfers between the various hostels, eight being transferred from the smaller homes to Fulwood Civic Hostel, two from Fulwood Civic Hostel to the small units and one from Wilson House to Ashton House.

Approximately 79% of the persons admitted or transferred between hostels were in the 74 or over age groups as the following table shows :

<i>Age to</i>	64 +	69 +	74 +	79 +	84 +	89 +	90 +
Fulwood Civic Hostel	11	19	36	22	34	14	1
Small Hostels	1	4	6	8	8	2	—

Five persons were admitted during the year to allow relatives with whom they lived to take a holiday.

Discharges during the year were 149, divided up as follows, deaths 75, transfers to hospitals 35, to relatives or friends 5, whilst 34 left at their own request.

Mention was made previously of the Ancillary Services provided for hostel residents. The most popular is that of chiropody treatment. Residents have benefitted enormously from this service and are ever ready to avail themselves of treatment.

Regular sessions are held each week and the number of sessions held and treatments given for the year are :—

				<i>Sessions</i>	<i>Treatments</i>
Fulwood Civic Hostel ...	...	...	...	89	799
Ashton House ...	...	...	...	19	169
Wilson House ...	...	...	...	20	181
Sunny Bank ...	...	...	...	11	116
				<hr/> 139	<hr/> 1,265

Adaptations and alterations have been carried out at the Civic Hostel, Fulwood, to provide additional female accommodation. Thus two former staff rooms and a room that was used for the storage of residents' clean laundry have been converted to this use. In addition to this a sum of £1,220 has been spent on floor coverings, roof repairs, providing workshop accommodation for the shoe repairer and for repairs to the walls of, and painting of, the oil storage tanks. In addition alterations and additions have been made to the space heating system to make it more efficient and effective.

At the small homes, Ashton and Sunny Bank, bell alarm systems are to be installed. At the end of the year work was in progress on the installations.

The demand for tenancies of the flats adjacent to Wilson House Hostel has fallen off, so that at the end of the year there was a waiting list of 22, made up of seven two-member units and 15 one-member units. Two one-member units were granted tenancies during the year because of the death of the previous occupiers.

General oversight of the flat residents is provided by the staff of Wilson House Hostel. It is their responsibility to deal with the immediate needs of these residents when called upon to do so. In this connection some service is given at least once a week. This covers contacting doctors and relatives, making meals and fires, arranging for local authority domiciliary services to come in.

OTHER HOSTELS.

Use is made of other local authority and voluntary association homes in meeting the special needs of handicapped and aged persons. At the end of the year 37 persons were in this type of accommodation. Of these 15 were in Homes for the Blind, seven in Epileptic Colonies, one in a Home for the Deaf, 7 in various Homes catering for the needs of physically handicapped persons and 7 in various Homes catering for the special needs of aged persons.

Table 95 shows the number of persons classified according to handicap, in various hostels, at the end of the year.

Table 95.
Persons resident in accommodation on 31st December, 1964.

Descriptions of persons accommodated	In premises managed by the Council		In accommodation provided on behalf of the Council				No. of persons accom- modated for whom other local auth- orities are responsible		Total No. of persons for whom the Council are respon- sible	
			By other local authorities		By voluntary organisa- tions					
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Not materially handi- capped—										
aged 	67	85	—	—	—	7	9	2	58	90
not aged 	—	2	—	—	—	—	—	—	—	2
Blind—										
aged 	4	5	—	—	—	12	—	—	4	17
not aged 	—	—	—	—	3	—	—	—	3	—
Deaf—aged 	—	—	—	—	—	1	—	—	—	1
Epileptic—										
aged 	—	2	—	1	—	—	—	—	—	3
not aged 	1	—	2	2	—	2	—	—	3	4
Other physically handi- capped—										
aged 	65	86	—	—	—	—	5	3	60	83
not aged 	6	6	—	—	6	1	—	2	12	5
Mentally handicapped—										
aged 	9	21	—	—	—	—	1	4	8	17
not aged 	2	7	—	—	—	—	1	1	1	6
Total 	154	214	2	3	9	23	16	12	149	228

Temporary Accommodation.

Temporary accommodation is provided in adapted premises, No. 1 Maudland Bank. This was first opened in March 1953, firstly as a place where families requiring extensive and prolonged help could be assisted but latterly, because of the closure of other temporary accommodation premises, it has been used for both long and short term stay cases.

During 1964, six families have been accommodated. Two of these were rehoused, through the Housing Committee, two others found their own accommodation. The position at the end of the year was that two families were still in accommodation as the following table shows.

<div>Table 96.</div> <div>Persons in temporary accommodation.</div>										
Description of persons accommodated	In premises managed by the Council		In accommodation provided on behalf of the Council				No. of persons accommodated for whom other local authorities are responsible		Total No. of persons for whom the Council are responsible	
			By other local authorities		By voluntary organisations					
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
PERSONS OVER 16—										
(a) evicted ...	2	2	—	—	—	—	—	—	2	2
(b) others ...	—	—	—	—	—	—	—	—	—	—
ACCOMPANIED CHILDREN—										
(a) evicted ...	7		—		—		—		7	
(b) others ...	—		—		—		—		—	
Total ...	11		—		—		—		11	

Welfare of Handicapped Persons.

The degree of disability and the circumstances of each case vary enormously. The first requirement is expert medical and social diagnosis to identify precise needs. The assessment of needs should be made early and accurately to ensure that people are given the kind of help they require at the right time and in the right way, thereby preventing or postponing the need for residential or hospital care. The principal aim of the Welfare Services is to enable people to remain in their own homes as long as they wish whenever possible.

Social clubs and centres, holidays and outings and the provision of transport are vital to Handicapped Persons. The services provided are summarised below :

- the ascertainment of handicapped persons ;
- assistance in overcoming the effects of their disabilities and arranging for the provision of such treatment as may be required ;
- advice and guidance on personal problems ;
- instruction in handicrafts and simple diversionary occupations, and the teaching of the blind to read Braille and Moon ;
- the provision of social and recreational facilities ;

- (f) home visiting and practical assistance in the home ;
- (g) facilities for transport and holidays ;
- (h) assistance in securing employment in open industry, and the provision of sheltered employment in special Workshops.

These services apply, with necessary modifications, to the blind and partially sighted, the general classes of handicapped persons and the deaf and hard of hearing. The services may be provided directly or through the agency of voluntary organisations or a combination of both.

Blind and Partially Sighted.

There were 316 blind persons registered with the Authority as at the 31st December, 1964, 114 men, 201 women and one male child. Of these 58 men and 162 women were of pensionable age. Out of a total of 56 men between the ages of 16 and 65 years, 33 were working, 22 being employed in open industry and 11 in sheltered workshops, and out of a total of 39 women between the ages of 16 and 60, 4 were employed in open industry and 12 in sheltered workshops. There were 7 men and 17 women in residential accommodation provided under Part III of the National Assistance Act, 1948, and 3 men and 9 women in hospital. Of the blind with other handicaps in addition to their blindness, 3 men and 6 women were suffering from mental illness and 16 men and 28 women had various physical disabilities.

On the partially sighted register there were 34 males, 16 being 65 years or over and 84 females of whom 69 were aged 60 or over.

During the year the ophthalmologist examined 65 persons, of these 17 were re-examinations. Of these re-examinations one was recertified blind, 8 were re-classified blind and 8 remained partially sighted. In addition to those re-classified blind, ten men and ten women were admitted as new cases to the blind register and 9 men and 19 women were admitted as new cases to the partially sighted register.

The three Home Teachers for the Blind made 3,694 domiciliary visits during the year for the purpose of administering to the needs of the blind. They helped the blind on 319 occasions by doing domestic chores and letter writing. Braille was taught to 11 persons who had 65 lessons between them, and Moon to 2 persons involving 17 lessons. Handicrafts were taught to ten people, 57 lessons being given.

Besides these domiciliary visits the Home Teachers attend the Handicapped Persons' Workshop and Social Centre on Tuesday and Wednesday afternoons to organise social activities and to give handicraft instructions respectively. An average of 48 persons attended the Centre for pastime occupations throughout the year and between them they had 904 lessons. Social and recreational activities had an average attendance of 40 persons.

Tuesday and Wednesday evenings are devoted to social, recreational and educational events and these activities had an average attendance of 25.

During the year 311 journeys were made by the Welfare ambulance to transport disabled blind to the Handicapped Persons' Centre with an average load per journey of 18 persons. By the end of the year 1,297 meals had been served to blind persons, an average of 13 per day. A charge of 1s. 6d. is made for mid-day meals provided at the Handicapped Persons' Centre.

During the course of the year 237 bus passes, 219 wireless licences and 19 dog licences were provided for the blind.

A total of 17 persons used the National Library Service for the Blind.

At the end of the year there were 42 Braille readers and 8 Moon readers on the blind register.

There are 18 blind persons with talking books and 42 blind persons have wireless sets provided through the agency of the British Wireless for the Blind Fund. The Rediffusion service provided 109 wireless speakers at a reduced rental to the blind during the year.

The chiropody service was used by 37 blind and 8 partially sighted persons who, in 36 sessions, had 180 and 35 treatments respectively at the Handicapped Persons' Centre.

At Christmas 91 blind and 10 partially sighted housebound persons received a gift of either chocolate, cigarettes or tobacco according to their choice.

Five concerts were held during the winter months and these had an average attendance of 74. The Christmas Party was attended by 109 blind persons.

A total of 45 blind persons attended the annual Summer Outing which was to Harrogate, and 77 blind persons participated in the annual trip to Fleetwood and Blackpool.

Towards the end of the year all the partially sighted were notified of book titles in the Ulverscroft large type book series. These books have been specially printed in large type for readers suffering from failing sight. The Harris Public Library and local branches reported a keen interest in the publications with an abundant demand although this is a new venture and only time will tell whether or not the demand is sustained.

Employment.

There were 27 blind employed in open industry at the end of the year, which is a decrease of two over last year.

The Institute for the Blind, Fulwood, provides sheltered workshop employment and training of the blind on behalf of the Authority which is responsible for augmenting the earnings of approved workers up to an agreed national level. The Authority also makes a grant towards the expenses of the Institute in administering the Workshop for the Blind. The Ministry of Labour pay trainees during their period of training and capitation grant in respect of workers in sheltered employment.

At the end of the year 24 persons were in employment at the Blind Workshop and one man was undergoing training.

Maximum effort continues to be made to place blind persons in suitable employment and close liaison exists between the staff of the Authority and the appropriate officials of the Ministry of Labour.

General Classes of Handicapped.

At the end of the year there were 279 men and 374 women registered as physically handicapped persons. Of these totals 218 men and 205 women were of working age. There were 54 male and 49 female children registered on the 31st December, 1964.

The Health Visitor staff made 967 domiciliary visits to handicapped persons during the year and the Social Welfare officers of the Welfare Section made 256 visits.

Handicraft, recreational and social activities are provided at the Social Centre on Mondays and Thursdays of each week from 10.30 a.m. to 9.30 p.m.

Two handicraft sessions are held under the guidance of a handicraft teacher on Monday and Thursday of each week at the Handicapped Persons' Centre and an average of 40 persons attended each session receiving between them 2,152 lessons. A total of 10 housebound handicapped persons had handicraft instruction in their own home, 142 lessons being given.

Recreational activities held at the Centre on two afternoons a week had an average daily attendance of 9 persons. Evening social activities, excluding concerts, attracted a nightly average of 49 persons. These events covered social, recreational and educational activities.

Five winter concerts were given for the physically handicapped and an average of 107 persons attended them. The annual Christmas Party was attended by 158 physically handicapped people.

Midday meals are provided at the Centre upon request for a charge of 1s. 6d. and 2,036 meals were provided during the year to handicapped persons, an average of 20 per day.

The Welfare ambulance made 583 journeys to and from the Centre for the purpose of moving handicapped people who because of the severity of their complaints found it impossible to use buses. An average of 40 handicapped persons a day availed themselves of the service.

A total of 35 chiropody sessions were held at the Centre throughout the year. 49 physically handicapped people had their feet attended to and 267 treatments were given.

The annual Outing for the Physically Handicapped was to Harrogate and 66 physically handicapped persons participated.

Christmas gifts of either chocolates, cigarettes or tobacco were distributed to a total of 97 housebound persons.

During the year 7 handicapped persons have had adaptations and alterations carried out at their homes to enable them to get about and in and out of their homes more easily and to enable them to get in and out of their baths more easily also.

The Gold Thread Embroidery Section which functions at the Handicapped Persons' Workshop and Social Centre was "taken over" by a local Gold Thread firm. Three members of this class are now employed by the firm on an out worker basis and one other has been taken into employment by the firm on designing.

Deaf and Hard of Hearing.

A close liaison continues to be maintained between the Welfare Staff of this Authority and that of the North & East Lancashire Welfare Association for the Deaf who carry out Welfare services for the deaf and hard of hearing. The Council is represented on the Association. A per capita grant of £20.0.0 for each registered deaf person residing within the Borough, excluding children and persons resident in Part III accommodation, was made by the Authority to the Association. A total of 71 persons attracted the grant and the annual contribution by the Authority amounted to £1,420.

Table 97 shows the number of persons included on the various registers of handicapped persons arranged according to age, sex and handicap.

Table 97.
Number of persons registered on 31st December, 1964, in accordance
with handicap and age group.

Age Group	Sex	Blind	Partially sighted	Deaf	Hard of Hearing	Other handicapped Persons	Totals
1+	M.	—	—	1	1	1	3
	F.	—	—	1	1	1	3
5+	M.	1	2	3	7	21	34
	F.	—	—	2	2	17	21
10+	M.	—	1	5	18	32	56
	F.	—	1	—	12	31	44
15+	M.	1	3	5	11	31	51
	F.	3	—	5	5	41	54
20+	M.	8	4	6	4	52	74
	F.	1	1	3	4	40	49
30+	M.	6	4	6	—	23	39
	F.	3	2	7	2	29	43
40+	M.	9	—	6	3	28	46
	F.	9	1	6	3	33	52
50+	M.	21	3	8	1	54	87
	F.	23	10	5	2	62	102
60+	M.	11	1	1	1	30	44
	F.	18	4	3	7	42	74
65+	M.	12	5	1	4	26	48
	F.	21	11	2	6	49	89
70+	M.	26	6	4	4	26	66
	F.	62	34	4	9	58	167
80+	M.	10	2	—	3	8	23
	F.	36	15	2	3	10	66
85+	M.	6	3	—	1	1	11
	F.	16	5	—	3	10	34
90+	M.	4	—	—	—	—	4
	F.	9	—	—	—	—	9
	Total	316	118	86	117	756	1,393

Handicapped Persons' Workshop and Social Centre.

The principal desire in the mind of a severely handicapped person is to be as self reliant as his, or her, disability permits, and to live a life as nearly normal as possible. The need may be for satisfactory occupation, or a social life, recreation and variety of interests.

The Handicapped Persons' Centre was built to make the aims and needs of the disabled outlined above, realisable, to convert their hopes into facts. Every attempt is made at the Centre to give a disabled man or woman whatever help is needed for maximum reinstatement into Society.

The aims of the Handicapped Persons' Centre are four :—

- (1) The restoration of independence ;
- (2) The provision of work under sheltered conditions for severely disabled workers ;
- (3) To provide handicraft facilities ;
- (4) To assist social maturity and development by the provision of educational and social activities.



HANDICAPPED PERSONS WORKSHOP AND SOCIAL CENTRE

Wherever possible a vocational assessment is made within the limits necessarily imposed by the handicapped person's disability and an effort is made to find the flair of the individual concerned. The assessment must be realistic, however, and it is rare for those attending the Centre to graduate to earning their own livelihood. Attendance at the Centre is not a panacea for the many problems which beset handicapped persons but attendance changes the situation of clients immensely, they no longer stand alone but have a willing and experienced staff to sustain them.

In many cases the Centre has become the hub around which the lives of those who attend rotate. It never ceases to be a cause of wonderment to witness the remarkable changes which attendance at the Centre so often brings about. Apathy, depression and despondency give way to alertness, cheerfulness and hope. By the encouragement to "socialise" an atmosphere is created at the Centre which enables the handicapped to be of psychological help to one another. A revived interest in life and other people soon becomes evident even in the most introvert. In terms of human happiness and the rehabilitation of morale the Centre is doing valuable work.

An exhibition of articles made by Handicapped and Blind Persons at the Handicapped Persons' Centre was held at the Centre from Saturday 12th September to Thursday 17th September.

About 400 people took the opportunity to look around. On show were knitted goods, embroidery, soft toys, needlework, basketry, cane work, rug work, leatherwork, metalwork and woodwork, orders being placed to the value of £220.

The Centre Concert Party continued to be in demand during the year giving several concerts in and around Preston.

Table 98.
Follow-up of Registered Blind Persons
January 1st—December 31st, 1964.

	Cause of Disability				
	Cataract	Glaucoma	Retrolental Fibroplasia	Others	Total
1. No. of cases registered during the year in respect of which sect. F of Form B.D.8 recommends :—					
(a) No Treatment ..	—	—	—	2	2
(b) Treatment (medical, surgical or optical) ..	9	—	—	12	21
Total	9	—	—	14	23
2. No. of cases at 1(b) above which on follow-up action have received treatment	1	—	—	4	5

Table 99.
Follow-up of Registered Partially Sighted Persons.
January 1st—December 31st, 1964.

	Cause of Disability				
	Cataract	Glaucoma	Retrolental Fibroplasia	Others	Total
1. No. of cases registered during the year in respect of which sect. F of Form B.D.8 recommends :—					
(a) No Treatment ..	1	—	—	3	4
(b) Treatment (medical, surgical or optical) ..	7	3	—	7	17
Total	8	3	—	10	21
2. No. of cases at 1(b) above which on follow-up action have received treatment	1	1	—	5	7

Domiciliary Visiting and Care.

Visiting of the aged is carried out by health visitors. During the year 3,350 such visits were made. On the initial visit immediate needs are met, a case history is compiled and when necessary follow up visits carried out. Members of the staff of the Welfare Section devote part of their time to enquiries about hostel accommodation, flats and protection of property.

Voluntary Associations, Church groups and other small groups of people not connected with any parent body do a vast amount of work for the elderly and handicapped.

No detailed information is available but data to hand includes the following :

The Preston Council of Social Services through its Old People's Welfare Committee and other Associated bodies provide a visiting service to some 500 elderly persons living alone.

The Women's Voluntary Service provide a chiropody service and a luncheon club. At the present time meals are provided once a week but soon it is hoped to extend this to twice a week.

The Old Men's Brotherhood & Catherine Beckett Club provide social and recreational activities and The Busy Bee Club in addition to social activities provides instruction in handicrafts.

Lions Club have been engaged in providing parties, outings and transport for the elderly and handicapped.

Several of the voluntary associations combined to arrange for some 100 elderly and handicapped persons to visit a local store after the normal closing hour.

Protection of Property.

The movable property of three persons admitted to hospital was taken into safe keeping.

It was necessary to take the movable property of one person admitted to hostel into care as the home was left unoccupied and there was no relative available to provide the necessary safeguard for this property. In all cases where persons were admitted to residential care leaving homes unoccupied the Police were requested to keep such homes under special observation.

Interments.

Under the provision of Section 50 of the National Assistance Act 1948, the Section arranged for the burial of seven deceased persons for whom no suitable arrangements for the disposal of the bodies had or were being made.

Full funeral costs were recovered from the estate of the deceased in four instances and part of the cost in the remainder.

National Assistance Acts 1948 and 1951.

No action was taken for the compulsory removal of persons under Section 47 of the National Assistance Act.

APPENDIX I

Report submitted to Health Committee, 18th August, 1964

Clean Air Act, 1956

PROPOSED TENTH SMOKE CONTROL AREA—HASLAM PARK

In 1959 the Council approved proposals for phasing areas of smokelessness from the western extremity of the town at Savick, Larches and Ashton, as well as extending the central area of smokelessness where progress was in great measure determined by the speed of slum clearance.

The No. 9 Smoke Control Order made by the Council at the beginning of this year was the subject of objection and a Ministry of Housing and Local Government inquiry was held on Wednesday, 5th August last when one objector and one member of the press were present along with staff from the local authority. The result of the inquiry should be available in the early autumn.

A contiguous area between Blackpool Road and the old County Borough boundary extending eastwards from Ashton on Ribble County Secondary School to Woodplumpton Road has been surveyed now and it is suggested that it could conveniently form the basis of the tenth area of smokelessness.

Though a small area of development on and around Blackpool Road took place in the first decade of this century the houses were mainly constructed in the third decade with further development in the past ten years. It is entirely residential in character and includes within it Haslam Park.

Data relative to this suggested tenth area of smokelessness are set out below.

Definition of the Area.

The area of the County Borough of Preston which lies within a line commencing at the junction of the centre lines of Woodplumpton Road and Blackpool Road, then proceeding westwards along the centre line of Blackpool Road to the point immediately opposite the south-eastern corner of the grounds of Ashton-on-Ribble County Secondary School, then northwards along the eastern boundary of the school grounds and along the eastern boundary of Savick housing estate to the centre line of Savick Brook, then eastwards along the centre line of Savick Brook to the centre line of Woodplumpton Road at Crawford Bridge, then southwards along the centre line of Woodplumpton Road to the point of commencement.

SIZE OF THE AREA : 175.1 acres or thereabouts.

NUMBER AND CHARACTER OF PREMISES WITHIN THE AREA :

Dwellings including flats and combined houses and shops—

Privately owned	...	...	...	...	...	...	...	920	
Council owned	...	...	...	...	...	...	...	2	
								<hr/>	922
Commercial premises (lock-up shops, stores and workshops)	...	...						21	
Clubs and public houses	...	...	...	...	...	...	...	2	
Motor vehicle repair and service garages	...	...	...	...	...	...	...	2	
British Railways signal box and workmen's cabin	...	...	...	...	...	...	...	2	
Public swimming baths	...	...	...	...	...	...	...	1	
Government office premises	...	...	...	...	...	...	...	1	
								<hr/>	29
Total premises in the area	...	...	...						<hr/>951 <hr/>

Cost of Conversion.

The projected shortage of gas coke consequent on the decision of the Gas Boards to derive gas from sources other than coal and the delay on the part of the National Coal Board in their mass production of solid smokeless fuel together with the consequential alteration in grant arrangements outlined in Ministry of Housing and Local Government circular 69/63 make an estimation of cost very problematical.

From the limited experience gained in the application of the No. 8 Order there is an overwhelming preference for gas fired appliances (over 60%) and almost no demand for off peak electrical heating. Furthermore, some houses in this area have already appliances capable of burning solid smokeless fuel and since in practice this alleged impending shortage of such fuel is not apparent in Preston it may well be that some householders may take no action other than to use solid smokeless fuel in their existing modern appliances. Since the requirement of the orders is that smoke shall not be emitted from a chimney such action in itself would not constitute an offence.

The cost of providing and installing a reasonable gas fire is of the order of £19.10.0 to £21.10.0. In the circumstances outlined above it is felt that an average expenditure in excess of £40 per house is unlikely.

Fuel Replacement.

Consultations are at present taking place with the fuel producers in respect of an estimated replacement of about 2,600 tons of bituminous coal. Coalite and Chemical Products Ltd. have indicated that extensions to their two works at Askern and Bolsover to be completed during the current year will enable them to supply additional coalite for this area in quantities sufficient to meet the demand for that fuel. Difficulty

is not anticipated in the supply of gas or of electricity and the National Coal Board are giving thought to the supply of reactive solid fuel from their national production in addition to the freely available Sunbrite.

I am satisfied that whatever the ultimate choice may be by householders within the provisions of Circular 69/63 there will be readily available in ordinary circumstances, fuel of the type required.

Exemptions.

No technical problem associated with industrial plant exists in this area but authority for the use of sticks and paper for kindling may require to be given in those few instances where a gas service is not already provided to a house.

Date of operation of Order.

Any order that is made could reasonably operate from 31st July, 1965.

J. S. G. BURNETT,
Medical Officer of Health.

Municipal Building,
Preston.
12th August, 1964.

APPENDIX II

Report submitted to Health Committee, 17th November, 1964

PROGRESS IN SMOKE CONTROL

With the recent confirmation of the Corporation's No. 9 Smoke Control Order involving the Larches and Savick areas confirmed orders now cover 21% of the area of the town, 21% of the dwellings in the town and 22% of the premises in the town.

Certain developments have occurred in two other areas of the town that merit the attention of the committee in relation to the determination of two more areas of smokelessness.

- (1) Progress in the representation of unfit houses and of redevelopment schemes has resulted in most of the land between Park Road and Deepdale Road south of Meadow Street being covered by housing or redevelopment orders and clearance is in progress at the present time. It seems opportune to suggest that the whole of this area should be the subject of an order so that full control over air pollution from it can be exercised by the Corporation.
This suggested eleventh area of smokelessness covers some 26 acres contiguous with the No. 7 and 8 areas. Relevant details are set out below.
- (2) For some time past efforts have been directed towards the reduction of air pollution from the dock estate and its environs. The Ribble Committee and its officers have collaborated actively on a short term basis by the use of smokeless fuels in certain plant and on a more permanent basis by the replacement or closing down of obsolete plant. Industrial and commercial firms have reviewed their plant and improved efficiency has been achieved in some instances whilst in others plant modifications are in the process of being carried out. There are, however, some obsolete stoves still in use in some premises and it is suggested that the whole area of some 276 acres lying between the Nos. 4—9 areas on the river side of Strand Road and Watery Lane be included in a twelfth area. It should be appreciated that such an order will not apply to ships, railway engines and mobile steam cranes which are covered by other sections of the Clean Air Act. Relevant data are set out below.

Proposed Eleventh Smoke Control Area—East View/Park Road

DEFINITION OF THE AREA :

The area of the County Borough of Preston which lies within a line commencing at the intersection of the centre lines of Meadow Street and Park Road, then proceeding south eastwards along the centre line of Park Road to its intersection with Church Street, then north eastwards along the centre line of Church Street and continuing in the same line along the centre line of Mill Bank to its intersection with Deepdale Road, then northwards along the centre line of Deepdale Road to its intersection with Meadow Street, then westwards along the centre line of Meadow Street to the point of commencement with Park Road.

SIZE OF THE AREA : 26 acres or thereabouts.

NO. AND CHARACTER OF PREMISES IN THE AREA :

		A.	B.
(a) <i>Dwelling Houses</i>			
(i) Private	265		
(ii) Corporation owned	5		
	<hr/>	270	
(iii) Houses in Clearance Areas	16		
(iv) Houses in confirmed Housing Act Orders	308		
(v) Houses in Town Centre Redevelopment Areas	28		
	<hr/>		352
(b) <i>Other Premises</i>			
(i) Industrial	2		
(ii) Commercial—shops, etc.	22		
(iii) Churches and Church Halls	4		
(iv) Social Clubs	2		
(v) Public Houses	9		
	<hr/>	39	
(vi) Premises in Confirmed Housing Act Orders			24
(vii) Premises in Town Centre Redevelopment Areas			29
		<hr/>	<hr/>
		309	405
		<hr/>	<hr/>

A.—Premises likely to remain for smoke control.

B.—Premises demolished or likely to be demolished in the near future.

COST OF CONVERSION :

Householders now have the opportunity of receiving grant on solid fuel burning closed room heaters with back boilers and underfloor draught open fires or gas fires or electric heating with emphasis on overnight storage heaters. There is no evidence of the last mentioned form of space heating being in particular demand in smoke control areas but inquiries have been received regarding all other forms of heating mentioned. The best available evidence suggests that an average figure of £44 per house is not likely to be exceeded.

FUEL REPLACEMENT :

740 tons of bituminous fuel will be replaced by solid smokeless fuel, gas or electricity. The National Coal Board expect to have supplies of their new fuels available for the 1965-66 heating season and improved quantities of coalite are also expected. Gas and electricity are also in free supply and there should be no difficulty in obtaining adequate supplies of fuel for this area.

EXEMPTIONS :

No technical problem associated with industrial plant exists in this area but authority for the use of sticks and paper for kindling may require to be given and exemption may also be required in respect of premises designed for closure but still occupied at the date of coming into operation of the order.

DATE OF OPERATION OF ORDER :

Any order that is made could reasonably operate from the 1st October, 1965.

Proposed Twelfth Smoke Control Area—Ribble Dock/Strand Road

DEFINITION OF THE AREA :

The area of the County Borough of Preston which lies within a line commencing at the intersection of the centre lines of Watery Lane and West Strand, then proceeding southwards along the centre line of West Strand to its junction with Marsh Lane, then westwards along the northern boundary of the bonded warehouse to its north western corner, then generally south westwards along the boundary of the Avenham and Ashton Wards to the junction with the Borough boundary south of the River Ribble, then westwards along the Borough boundary to a point due south of No. 2 lock gate, then northwards across the River Ribble directly to No. 2 lock gate, then north westwards along the eastern wall of the dock basin, then northwards to the commencement of and along the centre line of the roadway immediately to the east of the boilerhouse and storage tanks of the Esso Petroleum Company Limited to the intersection of the centre line of that road with the centre line Chain Caul Road, then westwards along the centre line of Chain Caul Road to the point immediately opposite the south western corner of the premises occupied by Lancashire Tar Distillers Limited, then northwards along the western boundary of that Company's premises and continuing northwards along the same line to a point on the boundary line between Savick Ward and Ashton Ward, then eastwards along the Ward boundary line to the intersection of the centre lines of Watery Lane and Pedders Lane, then eastwards along the centre line of Watery Lane to the point of commencement.

SIZE OF THE AREA : 276 acres or thereabouts.

NUMBER AND CHARACTER OF PREMISES WITHIN THE AREA :

Dwellinghouses—

(a) Privately owned	...	...	...	...	...	...	1	
(b) Corporation owned	...	...	...	...	...	...	1	
								2
Commercial premises (workshops, warehouses and offices of commercial enterprises)	...	...	...	...	...	...	43	
Industrial premises (large works and factories)	...	...	...	...	...	...	11	
Preston Corporation Dock Undertaking premises (workmen's cabins, canteens, warehouses and offices)	...	...	...	...	...	...	57	
Preston Corporation premises (Sewage Pumping Station)	...	...	...	...	...	...	1	
Government Department Premises	...	...	...	...	...	...	1	
Other Premises	...	...	...	...	...	...	9	
								122
Total Premises in the Area ...								124

FUEL REPLACEMENT :

120 tons of bituminous fuel used in small stoves and ranges will require to be replaced by gas, electricity or hard coke and this presents no difficulty.

268 tons of bituminous fuel will be replaced by electric power when the new workshops of the dock undertaking are completed.

INDUSTRIAL PLANT AND LARGE SCALE SPACE HEATING PLANT :

In this proposed area are the following plants all capable of being operated smokelessly :—

- 6 oil fired boilers.
- 8 coke fired boilers.
- 3 oil fired hot air blowers.
- 3 multiple electric night storage heaters.
- 4 electric under-floor heaters.

Of the remaining plant that would be directly involved if an order were to be made only one presents sufficient technical difficulty in its solution to merit exemption from the operation of the order.

EXEMPTIONS :

The sticks and paper for kindling rule should apply where appropriate and 15 diesel engine test beds at the English Electric Co. Ltd. works at Strand Road should be granted qualified exemption. In the process of testing new engines smoke is produced deliberately at one stage and it is not a practicable proposition to attempt any system of afterburning.

DATE OF OPERATION OF ORDER :

Any order that is made could reasonably operate from 1st September, 1965.

J. S. G. BURNETT,
Medical Officer of Health.

Health Department,
Municipal Building,
Preston.

11th November, 1964.

SCHOOL HEALTH REPORT, 1964

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INTRODUCTION

TO THE CHAIRMAN AND MEMBERS OF THE SPECIAL SERVICES SUB-COMMITTEE OF THE
EDUCATION COMMITTEE.

Three main activities tend to occupy the attention of the school health service at present.

Certain diseases and infections occur sporadically or are endemic and require the adoption of measures for their control. In this category fall such conditions as head louse infestation, which though lessening is a peculiarly intractable problem. Enuresis is another area in which cure is difficult to achieve, whilst verrucae are a particular problem especially in secondary modern schools. A useful development in the control of this latter condition has been the provision of chiropody and recovery in many cases has been accelerated in consequence.

In other instances disease either congenital or acquired after birth produces a degree of disability that militates against the child's chances of benefiting fully and completely from formal education. Modern advances in medicine are such that much can be done today in the provision of medical treatment to relieve materially the extent of the handicap. The school health service has the duty of assessing the capacity of such children to benefit from formal education, in the light of their handicap and of supervising their progress throughout school life. Special skills and experience are needed and are acquired by post graduate courses and in-service training. The educational treatment of the handicapped child is today possibly the most important part of the work of the school medical officer.

Youth is an impressionable period and health education is a means of bringing home to boys and girls some of the issues that they must soon face. It can also help to counteract some of the more lurid propaganda reaching them from other sources. This service has, by virtue of staff changes, played a less significant part this year than previously but will it is hoped be a potent influence for good in the coming year.

With the retiral of Dr. McLean, after a long and faithful service with the Corporation, Dr. Purdom has been appointed Hon. Clinical Assistant to the Paediatric Department of the Preston Royal Infirmary and this maintains the close co-operation between that department and the school health service. An interesting investigation,

which included the willing co-operation of Dr. Robertson of the Public Health Laboratory service, into the occurrence of nephritis among children at one school is reported on page 164 of this report.

The health of the school population during the year has been good. It has not been affected by serious epidemic illness and the general nutritional state is too well known to be worthy of comment.

The main difficulty in the provision of full facilities has been a shortage of staff in certain fields of activity. The dental service remains but a shadow of its former self and speech therapy is once again not available through lack of staff.

I am grateful to Dr. Purdom who has been responsible for the preparation of the body of the report.

J. S. G. BURNETT,
School Medical Officer.

SCHOOL HEALTH REPORT 1964

A.—GENERAL INFORMATION

1. Statistical Data.

Statistical data, including the cost of the School Health Service and tables relating to the medical inspection of school children will be found in the Appendix at the end of the report.

2. Staffing.

Several changes in staff occurred during the year.

- (a) *Medical Officers.*—The establishment of six doctors was never filled during the year, there being five school medical officers for the first eight months and only four during the last term. Dr. B. G. Farrell left in July to take up another appointment, his place being taken the same month by Dr. J. Carroll.
After 27 years' continuous service with this Authority Dr. G. A. McLean retired in August, 1964.
- (b) *Dental Officers.*—The only full-time dentist was the Senior Dental Officer. There was part-time assistance from one dentist throughout the year and from two others during the first half of the year.
- (c) *Clinic Nurses and Health Visitors.*—At the end of the year there were six clinic nurses and 25 health visitors (including two who undertook part-time duties only). This represents no change from last year, although considerable depletion through sickness was experienced.
- (d) *Ancillary Staff.*—One physiotherapist and one speech therapist undertook part-time duties until the end of the summer term. The vacancy for speech therapist was unfilled during the remainder of the year, but a part-time physiotherapy service was resumed at the Open Air School in September.

3. School Population.

Table 100 shows the number of schools of various types in Preston and the number of children on roll at 18th December, 1964. One secondary school (Trinity) was closed during the year and two new ones (Tulkeþ and William Temple) were opened.

Table 100.
School Population.

Type of School	No. of Schools	No. on Roll
Primary	33	10,242
Secondary	11	4,972
Secondary Grammar	5	3,249
Special (Day)	2	277
Nursery School	1	100
Total	52	18,840

4. Deaths of school children.

During the year the deaths were recorded of five Preston school children, whose ages fell within the range of 4 to 13 years.

Two of these deaths resulted from brain tumours, one from heart disease, one from intestinal obstruction and one from fractured skull. There were no deaths among school children as the result of road accidents.

B.—ROUTINE EXAMINATIONS

1. Periodic Medical Inspections.

The routine examination of pupils by the school doctor continued during 1964 without change in the arrangements. Each pupil is medically examined on school entry and before leaving school, with an intermediate examination at eleven years of age.

A revised form for completion by parents prior to the medical examination of their children was introduced in the Autumn term. The previous form gave undue prominence to infectious diseases from which the child might have suffered—information of little value in the context—without providing space for details of any defects or problems which caused concern to the parent, or which might affect the child's education. The revised form explains the purpose of medical inspection, gives ample space for parental comment regarding physical defects or emotional problems and invites consent for appropriate immunisation against poliomyelitis, diphtheria, whooping cough and tetanus.

With no more than two-thirds of the parents of school entrants attending the periodic medical inspections, and an average of only 10% of parents of children from the older age groups, there is clear value in written statements from parents. There are, however, many children for whom blank forms are returned despite obvious defects when examined.

In the event of selective medical inspections being adopted it seems evident that a detailed questionnaire demanding a "yes" or "no" answer would be essential.

FINDINGS AT PERIODIC MEDICAL INSPECTIONS.

During 1964, 5,814 children were inspected compared with 5,875 in the previous year. Defects requiring treatment totalled 1,143. Three children were classified as of unsatisfactory physical condition—there were two in 1963.

Visual defects accounted for one-third of the conditions requiring observation or treatment, ear, nose and throat and orthopaedic defects providing a further one-third. This represents no significant change in incidence, and comparison of figures for 1963 shows that, in Preston, the incidence of defects in school-children conforms closely to national averages, with the exceptions of defective vision and skin conditions, both of which were above the average. As regards the latter the figures for 1964 show an improvement. The wide fluctuations in the reported incidence of visual defects throughout the country doubtless reflects differing standards of vision testing rather than a varying incidence of defective vision. Indeed, for a child living in an area of high "incidence" there is the advantage of an earlier remedying of the defect.

Details of the findings at periodic medical inspections will be found in the Appendix in Table 109.

2. Hygiene Inspections.

The improvement in the incidence of head-louse infestation noted in 1963 has been maintained this year, but evidence of infestation in one of every ten girls examined emphasises the need to continue the campaign of treatment and education with diligence. Table 101 summarises the findings.

Table 101. Uncleanliness.	
Total number of examinations in the schools by the school nurses ...	38,660
Total number of individual pupils found to have head-louse infestation ...	1,386
Number of pupils inspected in Spring term	10,760
Number of these pupils found to have head-louse infestation	727
Percentage found to have head-louse infestation	6.75

3. Routine Vision Testing.

Under the present system, school-children should have a minimum of five tests of vision during their school life, viz.: at the three periodic medical inspections and at 8+ and 12+ years. For Grammar school pupils the test at 12-13 years is combined with the additional periodic medical inspection at that age and they are not included in the following figures. With 1,786 8-year-old and 792 12-year-old pupils tested during the year approximately 90% and 75% of pupils in these two age groups have been covered. This is an improvement on the figures for 1963 but is accompanied by a reduced percentage of children given the sweep test of hearing (see item 4). Both these screening tests are undertaken by the school nurses whose numbers were unfortunately depleted through illness for several months of the year.

There is a need to ensure standard conditions for accurate vision testing. The requirements of good illumination of the test-chart and a six metre distance between child and chart may not be readily achieved. An illuminated test-chart has helped to meet the former difficulty but not the latter. Corridors or cloakrooms, with their obvious disadvantages, alone may provide the requisite distance.

There is evident advantage in a method of screening visual acuity which can be carried out in any small room with the child seated, and without the need for separately covering each eye or for movement of the examiner away from the child. It appears that test apparatus which fulfils these requirements is now obtainable, and consideration will be given to its use.

4. Routine Audiometry.

Routine screening tests of hearing of children early in their school life is an important procedure. At present this is carried out on children age 6-7 years, using an "Amplivox" pure-tone audiometer. Hearing is tested separately in each ear over a range of frequencies with a fixed intensity of 25 db.

During the year 824 children were tested. The reduced numbers tested resulted partly from staff shortage already noted, but also from a deliberate postponement of the testing from the Autumn to Spring and Summer terms of the following year. The greater incidence of upper respiratory infections during the former period has previously been found to give an unrealistic failure rate. With 88 children failing the test during the year, there was a failure rate of 10.7% which accords with expectation. All of the 88 failures were reviewed by a school medical officer. Table 102 shows the results of this review.

Table 102
Review of pupils failing sweep-test audiometry

Satisfactory—no defect	..	..	..	..	..	..	..	38
For review 1 year	..	..	..	..	..	..	..	5
Attending E.N.T. clinic	..	..	..	..	..	..	..	7
Referred E.N.T. clinic	..	..	..	..	..	..	..	2
<i>Referred for full pure-tone audiogram</i>	..	..	..	..	..	..	..	36
Of these 36 : Satisfactory audiogram	..	..	..	..	..	..	..	19
Defaulted	..	..	..	..	..	..	..	2
<i>Unsatisfactory audiogram</i>	..	..	..	..	..	..	..	15
Of these 15 : Referred to G.P.	..	..	..	..	..	..	..	8
Referred to E.N.T. clinic	..	..	..	..	..	..	..	6
Repeat audiogram requested	..	..	..	..	..	..	..	1
Total	..	..	..	..	..	..	..	88

C.—SPECIAL EXAMINATIONS

1. Special Medical Inspections.

Fewer children were seen during 1964 for "special" inspection than previously. The presence of a defect in a child is not in itself adequate reason for regular review. If the defect requires no treatment, and will neither advance in severity nor handicap the child in any way, special inspection is of no value. Furthermore, the re-inspection of a child with a potential handicap can be valueless without information from such

sources as parents, teachers, family doctor or health visitor. With depletion in the medical staffing during the year it was necessary to be more selective in the children brought forward for review. It should be noted that the figures in Table 109 in the Appendix relate to the defects actually discovered in the course of a special inspection and do not indicate conditions previously noted.

It is always difficult to assess the results of treatment of a condition which is likely in any case to be self-limiting. Such is the case in evaluating the results from the use of the electric alarm apparatus for nocturnal enuresis. After four years of this provision, and with 11 alarms now in use, many of the children most suited for this treatment by age, temperament and home environment have been treated. This has left many younger children on the waiting list, and also some older ones with problems which made an unsuccessful result not unexpected. In more than one case a fear of the alarm could not be overcome.

Altogether 24 children were issued with the alarm during the year—17 boys, 7 girls. Of these, six were aged 7 years and under. One of these six is still on treatment, two were cured and three were not improved. If appropriate, re-issue of the alarm at an older age will be considered in these cases. The overall results for the 24 children whose average age was 10 years is as follows :

Cured, 10 ; not improved, 11 ; still on treatment, 3.

2. Juvenile Employment.

School-children require a certificate of fitness in order to undertake part-time employment. It is only infrequently that a pupil is certified as unfit, but it is these exceptions that warrant the examination. While routine annual medical review before renewal of licences is not justified, this can be requested by the school medical officer. Newspaper delivery is the principal form of employment and recommendation may be made that this be limited to one round per day. Disregard of the hours of employment permissible under local bye-laws may come to light and this is duly reported. In 1964, 246 children were examined for juvenile employment.

3. Convalescent Holidays.

Recommendation by a school medical officer is required for pupils proposed for convalescent holidays. During 1964, 172 pupils stayed at Thomas Parkinson House, St. Annes-on-Sea ; the majority for a fortnight's stay. Due mainly to lack of financial support, this Home closed finally in October, 1964. Since 1946 the Preston School-Children's Fund has provided convalescent holidays for 3,569 pupils. During the first eight years this was by arrangement with convalescent homes in Rhyl and Morecambe. Between 1946 and 1954, 73 children stayed at Rhyl for periods of one month and 1,021 were catered for at Morecambe for periods of two weeks. For ten years Parkinson House has been run by the Preston School-Children's Fund for the benefit solely of Preston children. In that period, 2,475 children have stayed there. Latterly the need has been less for a period of convalescence from an acute illness as a change from an unsatisfactory home environment.

Some pupils suffering from epilepsy who otherwise would be precluded from holidays away from home because of their condition, have enjoyed the benefit of a week at a convalescent holiday home run by the British Epilepsy Association. Three children had this provision during 1964.

4. Training College Entrants and School Teachers.

During the year medical examination was undertaken of 72 candidates for teacher training colleges and 3 teachers entering employment not directly from college. This compares with 66 candidates and 7 teachers examined in 1963.

5. Minor Ailment Treatment.

The reduction by over one half in attendances for minor ailment treatment during the past five years, is largely due to the reduction both in the frequency and length of sessions. Over three-quarters of the conditions for which treatment is sought are minor injuries or sores which could be treated at home or, if need be, by first aid treatment in school. Other conditions, on the other hand may rather justify a visit to the family doctor. There will, of course, always be the hard core of children for whom appropriate treatment may not be obtained on account of parental ignorance or indifference. The fact that attendance at schools or clinics for short treatment sessions is an uneconomic use of the school nurse's time, and the recognition that early detection of visual or hearing defects by screening methods is her more important job, make it necessary to review the existing arrangements.

Table 110 in the Appendix gives the number and nature of conditions treated during the year. Verrucae, previously included under the heading "other skin diseases" are now shown separately. While the policy has been reference of these cases to family doctor, hospital or chiropodist, infrequent treatments or failure to persevere with treatment have accounted for many failures. This has led to a return to treatment in the schools where indicated. It is intended to make use of the services of one of the local authority clinic chiropodists to give treatment in schools where there are several cases.

It will be noted that the number of cases of scabies seen shows an increase from last year. Further treatment of these is given by the family doctor or at Greenbank Clinic. This clinic and Cuttle Street Health Centre also provide facilities for the cleansing of infested children.

D.—HANDICAPPED PUPILS

1. Ascertainment.

The designation "handicapped pupil" is applied where, on account of physical or mental defect, a pupil cannot satisfactorily be educated under the normal regime of an ordinary school, or this is only possible with the help of some additional training or aid.

Full physical and developmental examination of infants and toddlers in the child-welfare clinics helps to ensure early recognition of handicaps and the application of appropriate special educational provision from an early age.

Details of examinations carried out to determine educational subnormality are given in Table 111 in the Appendix. Table 112 gives an analysis of the special educational provisions made for all handicapped pupils. The total number of pupils classified as handicapped at the end of the year was 433. Of these, there were 113 educationally subnormal, 108 with defective speech and 79 delicate pupils. Physically handicapped pupils numbered 58.

2. Special Educational Provision.

(a) IN ORDINARY SCHOOL.

Partially hearing pupils and those requiring speech therapy constitute the two main groups of handicapped pupils for whom attendance at an ordinary school may be satisfactory so long as this is accompanied by the provision of appropriate training or help. The provision will, of course, depend on the severity of the defect, the child's intellectual and emotional capacity for response and the conditions existing in the school and in the home. Thus the level of background noise in an ordinary school, and especially in older school buildings, interferes considerably with the efficient use of a hearing aid and may cause a child to abandon its use. At the end of the year there were 108 pupils with defective speech, 32 partially hearing children with hearing aids and 28 with lesser degrees of hearing defect in attendance at ordinary day schools. The four maladjusted pupils at ordinary school were resident at Larches Hostel, while five educationally subnormal pupils were awaiting admission to special school. A further 14 pupils, though not formally ascertained as educationally subnormal, were remaining at ordinary school pending admission to the day Special School for E.S.N. pupils.

There were 24 pupils attending ordinary schools listed as suffering from epilepsy. Only six pupils required special schooling primarily on account of epilepsy. From our knowledge of the incidence of epilepsy in children, it seems probable that there are as many cases unknown to the school doctor as those reported. There may be reticence on the part of the parents in reporting a history of fits, especially when they are well controlled on treatment and do not interfere with schooling.

(b) HOME TEACHING.

While the trend in recent years has been a lessening demand for this provision there were more pupils on home tuition during 1964 than for three years. Fortunately many of these were short-term cases, and while 18 pupils had home teaching for some part of the year only nine had this continued into 1965.

There were three children with acute rheumatism (none in 1962-63). In two of the cases there was no cardiac involvement and prolonged home tuition should not be necessary. By contrast the provision may have to be extended for the third case. Two five-year-old children with congenital heart defects, too young to attend the Open Air School, commenced tuition during 1964, while there were three pupils who required home teaching for varying periods on account of accidental injury. One girl after eleven years' continuous home tuition on account of a kidney complaint began her first experience of communal education when she commenced a two-year commercial course at the Harris College in the Autumn term. Tables 103 and 104 give details.

Table 103.
Classification of children having home teaching

Accident :								
Burns—abdomen and chest	..	..	..	..	..	..	..	1 girl
Injury to leg	..	..	..	..	..	..	..	1 girl
Injury to spine	..	..	..	..	..	..	..	1 girl
Acute rheumatism	..	..	..	..	..	..	..	2 boys, 1 girl
Congenital defects :								
Agenesis of lung	..	..	..	..	..	..	..	1 boy
Haemophilia	..	..	..	..	..	..	..	1 boy
Heart defect	..	..	..	..	..	..	..	2 boys
Orthopaedic conditions :								
Operation—knee	..	..	..	..	..	..	..	1 girl
Septic arthritis—knee	..	..	..	..	..	..	..	1 girl
Spasticity of feet	..	..	..	..	..	..	..	1 girl
Spinal scoliosis	..	..	..	..	..	..	..	1 girl
Other conditions :								
Infective hepatitis	..	..	..	..	..	..	..	1 boy
Hemiplegia	..	..	..	..	..	..	..	1 boy
Nephrosis	..	..	..	..	..	..	..	1 girl

Table 104.
Pupils having Home Teaching, 1955-64.

Year	Total for year	Number at end of year
1955	33	13
1956	19	19
1957	34	19
1958	29	11
1959	25	15
1960	24	12
1961	26	7
1962	12	6
1963	10	8
1964	18	11

(c) RESIDENTIAL SPECIAL SCHOOLS.

Details are given below. Of the physically handicapped pupils two suffer from cerebral palsy and one has a congenital abnormality of the bladder.

Table 105. Children in Residential Special Schools		
Category	School	Number of Preston pupils
(a) Blind Pupils	Henshaw School for the Blind, Old Trafford, Manchester	1
	Liverpool School for the Blind, Wavertree	1
(b) Partially Sighted Pupils	School for Partially Sighted Pupils, Fulwood, Preston (Day class)	4
(c) Deaf Pupils	Royal Cross School for the Deaf, Preston	21
(d) Partially Hearing Pupils	Liverpool School for Partially Hearing, Southport	1
	Thomasson Memorial Special School, Bolton	1
	Raynors School, Penn, Bucks.	1
(e) Educationally Subnormal Pupils	Hindley Hall Special School, Stocksfield ..	1
	Rudolph Steiner School, Aberdeen ..	1
	Springhill Special School, Ripon, Yorks. ..	1
(f) Epileptic Pupils	Soss Moss School, Chelford	2
(g) Physically Handicapped Pupils	Bethesda Home for Crippled Children, Salford	1
	Bradstock Lockett School, Southport ..	1
	John Capel Hanbury Memorial School, Woodford Bridge, Essex	1

(d) DAY SPECIAL SCHOOLS.

Last year's report gave an historical account of the development of the two Day Special Schools in the Borough together with details of the current facilities provided there. Comment this year can therefore be brief.

Open Air School for Physically Handicapped Pupils.

The distribution of pupils at this school at the end of 1964 was as follows :—

Boys : delicate 44, physically handicapped 29, epileptic 1.

Girls : delicate 34, physically handicapped 26, epileptic 3.

These figures include 13 children from the Lancashire County area, of whom 11 are physically handicapped and two delicate. In 1963 there were equivalent numbers of delicate and physically handicapped pupils in the school. The reduced proportion of P.H. pupils at the end of 1964 is accounted for by the increased number

of children with physical handicap discharged (eight at school-leaving age ; five returned to ordinary school) and the admission during the year of 21 delicate but only six physically handicapped pupils. Table 106 classifies the reasons for admission to the school in 1964 while Table 107 shows the distribution of certain disabilities among the pupils.

Table 106.
Classification of reasons for admission to Open Air School for Physically Handicapped Pupils in 1964.

	No. of Pupils
Asthma	6
Bronchiectasis	1
Cerebral palsy	2
Epilepsy	2
Nervous debility	8
Perthe's hip disease	1
Polycystic renal disease	1
Post-poliomyelitis paralysis	1
Post-primary tuberculosis	1
Respiratory infections	5
Rheumatic fever	1
Total	29

Table 107
Distribution of certain disabilities — Open Air School (P. H. Dept.)

Disability	*Category	No. of Boys	Girls
Anaemia or debility	D	7	14
Asthma	D	18	3
Bronchitis	D	4	5
Bronchiectasis	PH	3	2
Congenital heart defect	PH	1	2
Cerebral palsy	PH	9	8
Epilepsy	E	1	3
Haemophilia	PH	2	—
Hip disease (congenital and acquired)	PH	3	2
Nervous debility	D	9	9
Otitis	D	1	2
Post-poliomyelitis paralysis	PH	3	4
Renal disease	D	1	1
Spina bifida	PH	—	2

* D = delicate ; PH = physically handicapped ; E = epileptic

The Spastic Unit caters for children of about five years and upward with a severe degree of physical handicap. While, as the name indicates, the provision is especially for pupils suffering from cerebral palsy, those with comparable disability from other disease may be included. Thus, in the class, there is a five-year-old boy with paralysis of the legs following poliomyelitis, while two five-year-old girls, both requiring bilateral leg calipers, are due for admission in January, 1965. For one of these the handicap followed poliomyelitis, for the other it is the outcome of congenital dislocation of the hips. Both of these are likely to graduate to one of the ordinary school classes at seven years of age.

Every endeavour is made to integrate the children of the Spastic Class in the various school activities. Thus two of the boys had instruction in gardening and two in woodwork, while three boys and the two girls in the class attended for housecraft lessons along with pupils from the rest of the school. Seven members of the class attended the swimming baths twice weekly. The nine-year-old boy with spastic paraplegia, referred to in last year's report as having first walked unaided during 1963, is now showing his skill as goalkeeper on the football field.

There were nine children in the Spastic Unit at the beginning, and also at the end, of 1964. During the year there was one admission while one boy was discharged at school-leaving age. Unable both physically and intellectually for ordinary employment this boy has since worked successfully at the Adult Training Centre.

Open Air School for Educationally Subnormal Pupils.

There were 137 Preston children attending this school at the end of 1964. Of these, 105 were classified as educationally subnormal, 31 were backward children admitted on an informal basis and one was a somewhat retarded maladjusted child. There were 28 admissions and 20 discharges during the year. In addition to the 137 Preston pupils, there was one from the Lancashire County area.

Apart from 15 children who left at school-leaving age (see also item 3 opposite), there were four children discharged as follows :

Admitted to ordinary school (Secondary)	...	...	...	1
Admitted to hospital	...	...	...	1
Admitted to Junior Training Centre	...	...	...	1
Left district	...	...	...	1

The possibility of informal entry to the school has certainly simplified procedure for admission. However, although more places have been made available for pupils at the school in recent years, supply has not kept pace with demand and there is a growing waiting list. On this, at the end of the year, there were five pupils ascertained by school medical officers and 14 recommended for informal admission. Where there is parental objection to placement at the Special School, formal ascertainment is of course necessary. All pupils are reviewed by the school medical officer from time to time to determine whether the provision remains appropriate. There is a final assessment before leaving school at 16 years of age, the Local Health Authority being notified of any who require supervision thereafter.

Pupils in the school are encouraged to participate in physical activities. Children from ten years of age attend the swimming baths and the majority can swim at least the ten-yard breadth. Competitive sport was again encouraged this year by senior pupils taking part in inter-schools sports with three other schools for educationally subnormal pupils. Although having the advantage of the sports being held this year on their own ground, the Preston team just failed to take first prize. It is hoped that this event, calculated to develop a healthy sense of sportsmanship in those deprived of normal opportunities, may continue as an annual feature.

3. Employment for the handicapped.

Consideration of the problems of handicapped pupils in relation to employment on leaving school, and making of the appropriate recommendation, is the work of a team. Conferences continued to be held each term between parent, head teacher, youth employment officer and school doctor with the help of others, such as the disablement resettlement officer, if indicated.

Advice regarding employment can be given confidently where the abilities and limitations of the candidate are clear. Others may require vocational assessment before a recommendation can be made. Advantage is taken of courses for assessment and training held in various centres both by the Ministry of Labour and voluntary organisations (e.g. the National Spastic Society). Knowledge of suitable type of employment is one thing, placement another. This may be facilitated by arranging for school-leaving at times other than those normally adopted, when opportunities may be greater. For the more severely handicapped registration as a disabled person may be an advantage. During 1964, there were 11 boys and 11 girls (from all schools) registered thus on account of physical handicap.

Of the 23 school-leavers from the Open Air School for physically handicapped pupils, five were from the Lancashire County area. Recommendations for these were forwarded to the appropriate authority. Of the 18 resident in Preston, 15 are in employment. Of these, 13 were placed in their first job by the Youth Employment Officer, one after attending a vocational training course. Two girls have continued their education, one at Dene Park Further Education Centre for Spastics, the other by attending a full-time commercial course at the Harris College. One spastic boy, unable for ordinary employment, is usefully occupied at the Adult Training Centre.

From the Open Air School for educationally subnormal pupils there were 16 children who left at school-leaving age. Of these one boy left the district and another was placed at the Adult Training Centre. The remainder were all placed in employment, seven of them through the Youth Employment Bureau. While most of the occupations concerned require only unskilled manual labour three of those placed by the Youth Employment Officer commenced a training or apprenticeship.

E.—SPECIALIST CLINICS

1. Ear, Nose and Throat Clinic.

During the year each of the two hospital consultants held one session weekly at Saul Street Clinic. Transfer to this clinic of some of the cases initially referred to hospital helped to reduce the delay in children being seen. This did nothing, of course, to reduce the increasing list of children awaiting surgery, accounted for by shortage both of hospital staff and beds. Priority is however given where it is merited.

During 1964 there were 195 children referred to the clinic for an opinion regarding the following conditions :

Enlargement of tonsils or adenoids	...	...	...	91
Diseases of the ears	...	...	...	16
Defective hearing	...	...	...	36
Other conditions	...	...	...	20
				<hr/> 195

Further details are given in Table 112 in the Appendix.

2. Ophthalmic Clinics.

These clinics are held centrally at Saul Street. During the year refraction clinics continued to be held three times weekly, the two ophthalmic surgeons and Dr. Dowling, school medical officer, each taking one session. Cases of squint and other eye defects were seen at the Special Eye Clinic held fortnightly.

Details of the work of the clinics is summarised in Table 113 in the Appendix.

3. Paediatric Clinic.

This clinic, an extension of the hospital out-patient service, has been held at the Open Air School since 1948. For 14 years fortnightly sessions have been maintained under the direction of the paediatrician, Dr. A. G. Hesling, assisted by Dr. McLean. During September of this year these regular sessions ceased. Instead, many of the cases were transferred to the Children's Clinic at the Royal Infirmary. This was the arrangement for all cases who were pupils at schools other than the Open Air School, and for those whose condition required regular supervision, treatment or periodic hospital investigation. Sufferers from asthma, other chest conditions and those with heart defects formed the bulk of these transfers. For those pupils at the Open Air School with chronic disabilities requiring less frequent supervision and less active treatment, it has been arranged to hold paediatric sessions at the school two to three times each year. Children suffering from cerebral palsy are in the majority here.

The number of children seen at the Paediatric Clinic during 1964 was 76, compared with 96 in 1963. These have been classified below, while other details are given in Table 114 in the Appendix.

Asthma and associated conditions	...	...	...	9
Bronchitis and bronchiectasis...	...	...	...	8
Cardiac lesions	...	...	...	8
Cerebral palsy	...	...	...	14
Enuresis	...	...	...	2
Epileptiform attacks	...	...	...	3
Rheumatism	...	...	...	3
Obesity	...	...	...	11
Other conditions	...	...	...	18

As remarked in previous reports the general pattern of diseases for which children have attended this clinic has changed but little over the years, with one exception, namely the increased number referred on account of obesity in recent years.

Following the retirement of Dr. McLean in August, Dr. Purdom was appointed as honorary clinical assistant to the hospital Paediatric Department. Continuity of liaison with the paediatric service has thus been maintained and is further helped by the regular visits of one of the health visitors to that department.

4. Orthopaedic Clinic.

Eight sessions of this clinic were held at the Open Air School during 1964 with the consultant orthopaedic surgeon in attendance. Once again there has been a reduction in the number of cases seen, on account of the channeling to hospital out-patient department of children who will require active treatment or investigation. Only 17 new cases were seen at the clinic and three of these required transfer for hospital treatment or supervision. It is especially for Open Air School pupils with chronic disability, requiring no treatment other than physiotherapy, that periodic specialist supervision in school is an advantage.

The defects dealt with at the orthopaedic clinic during the year are as follows :

Congenital deformities ...	...	...	...	...	8
Other deformities ...	...	...	...	...	21
Cerebral palsy ...	...	...	...	...	16
Post-poliomyelitis paralysis ...	...	...	...	...	3
Familial ataxia ...	...	...	...	...	1
Muscular dystrophy ...	...	...	...	...	1
					<hr/> 50

Table 115 in the Appendix gives further details.

F.—SCHOOL DENTAL SERVICE

The Senior Dental Officer, Mr. A. Kershaw, has contributed the following remarks on the work of the School Dental Service for 1964 :

“Repeated advertisements for the posts of Senior Dental Officers, both in the British Dental Journal and the Press, have failed to arouse interest in suitable applicants. The dental service as a result has suffered from under-staffing during the year.

“It is, however, encouraging to find at school inspections that a very noticeable number of children are attending practitioners. This, coupled with requests for treatment at the clinics on the increase, indicates a move in the right direction in dental health.

“The Cuttle Street Clinic has been scheduled for modernisation and when completed will result in all clinics being equipped with air-rotas machines.

“Co-operation with the part-time services of Consultant Anaesthetist and Orthodontist has continued throughout the year at a most satisfactory level.”

Table 116 in the Appendix records the work done during the year.

G.—ANCILLARY SERVICES

1. Physiotherapy.

This provision was available each term at the Open Air School. With the resignation of Mrs. E. Herling in July, the three treatment sessions per week were taken over in September by Mrs. J. Foulkes, full-time physiotherapist with this Authority.

There were 75 school-children who received physiotherapy during 1964. Since September only pupils at the Open Air Schools have been treated, 59 in all. An analysis of these cases is given below :

Asthma	18
Other chest conditions...	8
Post-poliomyelitis paralysis	7
Cerebral palsy	17
Other orthopaedic conditions	7
Haemophilia	1
Muscular dystrophy	1

With 13 children discharged from treatment, there were 46 receiving physiotherapy at the end of the year. The discharges have been mostly chest cases or mild hemiplegias where maximum improvement has been obtained.

2. Speech Therapy.

The services of a part-time speech therapist, Mrs. J. Spencer, were available for the first six months of the year, but for only two sessions per week. One of these was held at the Open Air School, the other at Saul Street Clinic. Continuity of treatment under the same therapist may be of considerable importance to stammerers, and it is regrettable that with staff vacancies and changes this has not been possible. Children were accepted for treatment at the beginning of the year only after careful screening to give priority to severe cases where co-operation could be assured.

During January, 1964, there were 19 pupils accepted for treatment. In the next six months five were discharged and one new case started on therapy. With no treatment during the Autumn term the waiting list grew, and there were 108 children on it at the end of the year.

H.—PREVENTION OF INFECTION

1. Immunisation.

Immunisation against certain diseases is available to the school child. If, on entry to school, a child has not been immunised against diphtheria, whooping cough and tetanus, or vaccinated against poliomyelitis, the importance of these procedures is stressed to the parent and consent obtained if possible.

Primary or re-inforcing immunisation against diphtheria, whooping cough and tetanus is available to children at initial entry to school. At ten years injections are given only against diphtheria and tetanus. The occurrence of quite severe attacks of whooping cough in unprotected children during their first year or two at school justifies both primary and booster immunisation against it on school entry.

In the future, primary and booster doses of oral poliomyelitis vaccine will be given concurrently with these immunising injections, where parental consent has been obtained. The Sabin oral vaccine has the advantage of probably conferring protection also on some of the associates of those vaccinated. Particularly is this true among the pupils of the infant's department of a primary school who may not always practise the elementary rules of hygiene.

The importance of vaccination against tetanus needs to be stressed, especially now that the administration of anti-tetanic serum to casualties has been abandoned in hospital. During the year 2,046 school-children received a primary course of immunisation against tetanus, 984 of these being school entrants and 996 children of 10-11 years of age. Only a small minority of children have had a primary course of tetanus immunisation prior to school entry. The majority of these received it from the family doctor, since tetanus immunisation was only introduced into the clinics in 1961. The number of 10-11-year-old pupils who could have received this immunisation previously must necessarily be minimal, and yet the number who received a primary course of tetanus vaccine in 1964 (996) represents only about half of the population in that age group.

2. Tuberculosis.

(a) B.C.G. VACCINATION.

B.C.G. vaccination of 13-year-old school-children was continued during 1964. In addition, it was available for older pupils who for one reason or another had missed it at that age. In order to ensure maximal protection for the period of greatest risk—early adult life—routine vaccination prior to 13 years, although permissible, has been considered inadvisable. The known greater susceptibility to tuberculosis of diabetic children, however, has warranted earlier vaccination in some cases.

During the past five years the consent rate for this vaccination has been between 75% and 80% which is higher than the national average. This has been maintained through the co-operation of head teachers in requesting the return of completed consent forms, and by further contact with those parents not replying, by means of a letter from the Medical Officer of Health and, if necessary, a home visit by health visitor. For 1964 the consent rate was 75.7% ; out of a possible 1,686 in the appropriate age group there were 1,275 pupils for whom consent was obtained. Of these there were 1,110 available for the initial skin test of whom 898 (80.9%) were tuberculin negative. All of these received B.C.G. vaccination together with 100 older children, absentees from previous sessions. Although slightly lower than in the preceding two years, the percentage of positive reactors to the initial skin test (19.1%) has not varied significantly in recent years. Since the inception of the B.C.G. vaccination scheme in Preston in 1954, however, the proportion of positive reactors has dropped from over one-quarter to about one-fifth, indicating decreasing contact with infective cases.

Those children who reacted strongly to the skin test (Heaf's test grades 3 or 4) were referred to the Chest Clinic for x-ray and examination if necessary. There were 55 of these in 1964 of whom 14 had known contact with tuberculosis in the family. No cases of tuberculosis were revealed by this investigation although some of the pupils will be kept under review.

The practice of carrying out a further tuberculin test one year after the giving of B.C.G. has been discontinued since reversion to tuberculin negative has been rarely encountered following vaccination. It has been considered more important to examine the vaccination site after about six weeks, when reaction is at its greatest, and proffer reassurance, or advise where treatment is needed. This course has now been adopted.

(b) TUBERCULOSIS IN SCHOOLS.

During 1964 there were three notified cases of tuberculosis among school-children. The three cases, all girls, attended three different schools. All were suffering from a primary tubercular lesion, non-infectious in character. With appropriate treatment being taken and knowledge of a family source of infection in each case, there was no need for investigation of school contacts. Details are as follows :

- (1) primary lung infection—aged 7 years.
- (2) primary lung infection, with erythema nodosum—aged 6 years.
- (3) tubercular cervical adenitis—aged 5 years.

Following the notification of tuberculosis in a school teacher at a secondary girls' school, examination of school contacts was carried out in May, 1964. Involved in this were all girls in the two senior classes and also thirteen girls who had left school at the end of the preceding term. In addition, teaching and school-meals staff and the school secretary were examined. Tuberculin testing was carried out on all the girls with the exception of those previously given B.C.G. vaccination and those who had left school. These and the members of staff were referred to the Chest Clinic for chest x-ray only. Of the 48 pupils tuberculin tested, there were 11 "positive." These also were sent for chest x-ray. In the investigation no other case of tuberculosis was discovered.

3. Nephritis.

The true incidence of acute nephritis in children is not known. It is not notifiable and there are probably many mild cases not diagnosed. Yet untreated mild cases may proceed to chronic nephritis, a hazard to health and even life.

The occurrence during October and November of two cases of acute nephritis among the 87 pupils of Christ Church Junior School, both associated with the same type of throat infection, led to the discovery of two further cases in the school. Preliminary discussion with the consultant paediatrician preceded an investigation involving all pupils and members of staff.

After parents had been acquainted with the proposed investigation, pupils and staff had swabs taken from nose and throat. Eighteen of the children, but none of the staff, were found to be carriers of haemolytic streptococci. Eleven of these carried the same type of streptococcus as the two cases (Lancefield Group A, Griffiths Type 12). All children with "positive" swabs were referred to their family doctors with the recommendation of the paediatrician regarding treatment. The majority were given a course of oral penicillin. Prior to treatment, samples of urine were collected for laboratory examination. Two pupils were found with evidence of nephritis : albumen, red blood cells or casts in their urine. These two were referred to Dr. Hesling after consultation with their general practitioners. One of these cases had a previous history of nephritis in 1961, associated with the same organism.

As a further precaution, nose and throat swabs were again taken from all pupils and staff at the beginning of the next term (January 1965). Only three children were

found to be carriers of haemolytic streptococci Lancefield Group A. Two of these had no evidence of renal damage on urine testing, the other was one of the known cases of nephritis. Their doctors were duly notified for appropriate action to be taken.

The ages of the four cases of nephritis—two boys, two girls—were between 7 and 10 years. The streptococcal carriers were evenly distributed through the three classes of the school. This investigation has been a valuable exercise in preventive medicine. By it, not only were two cases of acute nephritis discovered, but others possibly prevented through prompt antibiotic therapy.

I.—HEALTH EDUCATION

The year 1964 saw but little field-work undertaken in schools. Considerable time, however, was spent in planning for the future.

The importance of educating youth in accident prevention and life saving was stressed in the report of the Royal College of Surgeons on this subject in 1963. It was emphasised that the only practical and effective place for teaching these subjects was in the schools. To this end material has been obtained suitable for illustrating future talks. Colour slides of typical accidental injuries treated at the Royal Infirmary have been obtained and will serve to promote discussion on the various causative factors. Two excellent colour films entitled "Emergency Resuscitation" vividly portray the vital role of "mouth to mouth" resuscitation in first aid. Every school-leaver should be acquainted with the essentials of this life-saving procedure.

Various organisations and other adult groups concerned with the welfare of youth have had meetings with the Deputy Medical Officer of Health and the Health Education Officer for discussion on their approach to sex education. Useful films and leaflets were demonstrated. Fuller details are given in the Report of the Medical Officer of Health.

In only two schools was it possible to continue the series of talks to girls by health visitors. However, where it has been undertaken, the course of instruction in menstrual function and mothercraft, occupying six visits, has been greatly appreciated.

Distribution of posters for display in schools continued. Publicity on the theme "Smoking and Health" was given by this means with it being impossible to arrange further lecture sessions in schools this year.

J.—OTHER PROVISION

The information in the following two reports has been kindly provided by Mr. Tuson, Chief Education Officer.

1. Physical Education.

In September 1964 two new secondary schools were opened, so that more children were benefiting from better facilities for physical education. At one of these schools (William Temple), a games gymnasium of 90ft. x 50ft. has been provided, allowing thus for games coaching throughout the year. The two new Roman Catholic Secondary Schools to be opened in 1965 will have similar provision, with also an all-weather Redgra area laid out for the St. Thomas More School. This will be similar to that which has recently come into extensive use for Brockholes County Secondary School.

It is hoped that children in all Secondary Schools will be stimulated by this wider concept of physical education introduced by the provision of better facilities.

The Youth Service Playing Field at Penwortham Holme provides facilities for physical recreation for young people. The floodlit Redgra area has been in constant use throughout the winter evenings, and the summer programme will present a greater variety of activities, with the newly prepared grass area supplementing the all-weather pitch.

This general expansion of the physical education programme must promote a higher standard of physical fitness in our children and an interest in the pursuit of leisure time activities of an invigorating and healthy nature.

2. School Meals and Milk-in-Schools Scheme.

SCHOOL MEALS.

The School Meals Service provides milk, dinners, and teas. Light mid-morning lunches are taken at the Open Air School. During the summer 4,569 packed dinners and 2,286 packed teas were supplied to schools going on educational visits. At Christmas 8,804 party teas were provided for school parties.

A total of 60 dining centres catered for dinners during the year. A summary of the findings of three surveys carried out gives the number of children taking dinner on three normal school days :—

February, 1964	...	...	...	...	...	9,316
June, 1964	...	...	...	...	...	9,233
September, 1964	...	...	...	...	...	10,193

The total number of dinners supplied during the year was 2,061,079 compared with 2,027,039 in 1963.

Four kitchens opened during the year as follows :—

Savick County Infants' School Kitchen—6th January, 1964.

Tulketh County Secondary School Kitchen—31st August, 1964.

William Temple Secondary School Kitchen—7th September, 1964.

Ribbleton Avenue County Infants' School Kitchen—16th November, 1964.

MILK-IN-SCHOOLS SCHEME.

During the year 2,771,789 bottles of milk were consumed, compared with 2,824,509 in 1963 ; 2,537,802 in maintained schools, and 233,987 in non-maintained schools, representing a daily average of 13,910 compared with 14,027 in 1963.

APPENDIX—STATISTICAL DATA

Table 108.
Cost of School Health Service 1964/65.

Expenditure	...	...	...	...	...	...	...	...	£55,274
Income	...	...	...	...	...	...	...	...	£2,763
Net expenditure	...	...	...	...	...	...	...	...	£52,511

Table 109.
Defects found at periodic and special inspections.

Defect or Disease	Periodic Inspections		Special Inspections	
	Number of defects		Number of defects	
	Requiring treatment	Requiring to be kept under observation but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
Skin	67	80	3	3
Eyes (a) Vision	584	308	47	24
(b) Squint	105	53	4	2
(c) Other	7	14	1	5
Ears (a) Hearing... ..	29	56	21	6
(b) Otitis Media	16	62	1	1
(c) Other	16	40	8	5
Nose or Throat	149	210	28	18
Speech	12	68	5	6
Lymphatic Glands	3	100	—	2
Heart	14	52	2	1
Lungs	25	138	1	3
Developmental (a) Hernia	2	12	—	—
(b) Other... ..	8	47	2	2
Orthopaedic (a) Posture	9	79	3	—
(b) Feet	27	160	2	3
(c) Other... ..	23	118	5	4
Nervous system (a) Epilepsy	8	30	—	—
(b) Other	5	41	—	4
Psychological (a) Development	3	58	2	2
(b) Stability	7	56	—	6
Abdomen	9	41	1	2
Other... ..	15	134	8	7
Total	1,143	1,957	144	106

Table 110.
Minor Ailments Treated (excluding uncleanliness).

							Number of Defects treated, or under treatment during	
							1963	1964
SKIN—								
Ringworm—Scalp—							—	—
Ringworm—Body							2	5
Scabies							47	56
Impetigo							102	145
Verrucae							—	42
Other skin diseases							1,158	713
EYE DISEASE—								
(External and other, but excluding errors of re-								
fraction, squint and cases admitted to hospital) ...							252	253
EAR DEFECTS—								
(Excluding serious diseases of the ear, e.g., operative								
treatment in hospital, etc.) ...							131	180
MISCELLANEOUS—								
(e.g., minor injuries, bruises, sores, chilblains, etc.) ...							9,627	8,693
Total							11,319	10,087
Total number of attendances at Authority's minor ail-								
ments clinics							22,438	16,390

Table 111.
Mental testing—Education Act, 1944, sections 34 and 57
Children Ascertained

Number deemed to be educationally subnormal	..	..		15
For admission to day special school for E.S.N.	..	..	14	
For admission to residential special school for E.S.N.	..	..	1	
Number deemed not to be educationally subnormal	..	..		2
For admission to day special school for P.H. (Delicate)	..	..	1	
Remain in ordinary school with special tuition	..	..	1	
Classification postponed	..	..	..	4
Number reported as unsuitable for education at school				
Section 57(4) Education Act, 1944.	..	..	..	12

Table 112.
Disposition of Handicapped Pupils at the end of 1964.

Classification	Total No.	Special School		Home Teaching	Ord. School	No School
		Day	Resid.			
Blind	2	—	2	—	—	—
Partially sighted	4	4	—	—	—	—
Deaf	23	—	21	—	1	1
Partially hearing... ..	35	—	3	—	32	—
Educationally subnormal	113	105	3	—	5	—
Epileptic	6	4	2	—	—	—
Maladjusted	5	1	—	—	4	—
Physically handicapped ...	58	44	3	8	—	3
Delicate	79	76	—	3	—	—
Speech defect	108	—	—	—	108	—
Total	433	234	34	11	150	4

Table 112.
Work carried out at E.N.T. Clinic.

New cases	190
Re-inspections	546
Referred for treatment in hospital	114
,, ,, ,, ,, clinic	64
,, ,, re-inspection ...	477
,, ,, X-rays	41
,, ,, audiometry tests	207
Deaf aid clinic	4
Total attendances	1,447
Treatment—	
Operative—Tonsils and adenoids	43
,, other nose and throat conditions	3
,, diseases of the ear	26
Audiometry tests	292
Other forms of treatment	19

Table 113.

[illegible]**Table 114.**

Number of individual children attended	...	...	...	...	...	76
New cases	...	...	...	...	...	29
Re-inspections	...	...	...	...	...	127
Total attendances	...	...	...	...	...	156
Referred—X-ray	...	...	...	...	...	9
Admission to hospital	...	...	...	...	...	4
Other forms of treatment	...	...	...	...	...	18

Table 115.

Number of individual children attended	...	...	...	...	...	50
New cases	...	...	...	...	...	17
Total number of attendances made	...	...	...	...	...	83
Number of children referred for treatment in hospital				...	...	—
Number of Surgical Appliances, e.g., boots, irons, etc., supplied through Centre	...	...	...	...	...	69
Number of children X-rayed	...	...	...	...	...	3
Number of children referred for Physiotherapy				...	...	22

Table 116.
Dental Inspection and Treatment.

1.	Number of pupils inspected by the Authority's Dental Officers—						
	(a)	Periodic Age Groups	...	...	...	...	6,652
	(b)	Specials	...	...	...	...	584
						Total	7,236
2.	Number found to require treatment						4,334
3.	Number offered treatment						3,686
4.	Number actually treated						1,681
5.	Attendances made by pupils for treatment (excluding 12(h))						4,241
6.	Half-days devoted to :						
	(a)	Inspections	...	...	...	...	66
	(b)	Treatment	...	...	...	...	668
		Total (a) and (b)	...	...	...	...	734
7.	Fillings : Permanent Teeth						2,680
	Temporary Teeth						946
		Total	...	...	...	...	3,626
8.	Number of Teeth filled : Permanent Teeth						2,191
	Temporary Teeth						755
		Total	...	...	...	...	2,946
9.	Extractions : Permanent Teeth						626
	Temporary Teeth						1,711
		Total	...	...	...	...	2,337
10.	Administration of general anaesthetics for extraction						622
11.	Other operations Permanent Teeth						2,339
	Temporary Teeth						615
		Total	...	...	...	...	2,954
12.	Orthodontics						
	(a)	Cases commenced during the year	...	...	...	...	21
	(b)	Cases carried forward from previous year	...	...	...	...	43
	(c)	Cases completed during the year	...	...	...	...	14
	(d)	Cases discontinued during the year	...	...	...	...	3
	(e)	Pupils treated with appliances	...	...	...	...	43
	(f)	Removable appliances fitted	...	...	...	...	25
	(g)	Fixed appliances fitted	...	...	...	...	2
	(h)	Total attendances	...	...	...	...	276
13.	Number of pupils supplied with artificial dentures						17

